

IP-Acute

Based on Spending Breakdown by Claim

Hospital Name	Provider Number	State
SOUTHEAST ALABAMA MEDICAL CENTER	010001	AL
MARSHALL MEDICAL CENTER SOUTH	010005	AL
ELIZA COFFEE MEMORIAL HOSPITAL	010006	AL
MIZELL MEMORIAL HOSPITAL	010007	AL
CRENSHAW COMMUNITY HOSPITAL	010008	AL
ST. VINCENT'S EAST	010011	AL
DEKALB REGIONAL MEDICAL CENTER	010012	AL
SHELBY BAPTIST MEDICAL CENTER	010016	AL
HELEN KELLER HOSPITAL	010019	AL
DALE MEDICAL CENTER	010021	AL
CHEROKEE MEDICAL CENTER	010022	AL
BAPTIST MEDICAL CENTER SOUTH	010023	AL
JACKSON HOSPITAL & CLINIC INC	010024	AL
GEORGE H. LANIER MEMORIAL HOSPITAL	010025	AL
ELBA GENERAL HOSPITAL	010027	AL
EAST ALABAMA MEDICAL CENTER	010029	AL
WEDOWEE HOSPITAL	010032	AL
UNIVERSITY OF ALABAMA HOSPITAL	010033	AL
COMMUNITY HOSPITAL INC	010034	AL

IP-Acute

Based on Spending Breakdown by Claim

Period	Claim Type
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient







































IP-Acute

Based on Spending Breakdown by Claim

Avg Spending Per Episode (Hospital)	Avg Spending Per Episode (State)	Avg Spending Per Episode (Nation)
\$8914.00	\$8069.00	\$8294.00
\$6809.00	\$8069.00	\$8294.00
\$8199.00	\$8069.00	\$8294.00
\$5192.00	\$8069.00	\$8294.00
\$5021.00	\$8069.00	\$8294.00
\$8888.00	\$8069.00	\$8294.00
\$6556.00	\$8069.00	\$8294.00
\$8062.00	\$8069.00	\$8294.00
\$7066.00	\$8069.00	\$8294.00
\$6398.00	\$8069.00	\$8294.00
\$5075.00	\$8069.00	\$8294.00
\$9081.00	\$8069.00	\$8294.00
\$7850.00	\$8069.00	\$8294.00
\$6841.00	\$8069.00	\$8294.00
\$4868.00	\$8069.00	\$8294.00
\$8624.00	\$8069.00	\$8294.00
\$4858.00	\$8069.00	\$8294.00
\$9933.00	\$8069.00	\$8294.00
\$5806.00	\$8069.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

Percent of Spending (Hospital)		Percent of Spending (State)	
	47.62%		46.64%
	41.11%		46.64%
	46.85%		46.64%
	38.76%		46.64%
	34.14%		46.64%
	49.15%		46.64%
	43.56%		46.64%
	46.64%		46.64%
	40.42%		46.64%
	41.83%		46.64%
	39.1%		46.64%
	46.56%		46.64%
	42.75%		46.64%
	45.54%		46.64%
	44.67%		46.64%
	54.19%		46.64%
	42.7%		46.64%
	50.76%		46.64%
	43.8%		46.64%

IP-Acute

Based on Spending Breakdown by Claim

Percent of Spending (Nation)	
<div></div>	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

CULLMAN REGIONAL MEDICAL CENTER	010035	AL
ANDALUSIA REGIONAL HOSPITAL	010036	AL
STRINGFELLOW MEMORIAL HOSPITAL	010038	AL
HUNTSVILLE HOSPITAL	010039	AL
GADSDEN REGIONAL MEDICAL CENTER	010040	AL
CHILTON MEDICAL CENTER	010043	AL
NORTH MISSISSIPPI MEDICAL CENTER - HAMILTON	010044	AL
FAYETTE MEDICAL CENTER	010045	AL
RIVERVIEW REGIONAL MEDICAL CENTER	010046	AL
GEORGIANA HOSPITAL	010047	AL
MEDICAL CENTER ENTERPRISE	010049	AL
ST VINCENTS BLOUNT	010050	AL
GREENE COUNTY HOSPITAL	010051	AL
PARKWAY MEDICAL CENTER	010054	AL
FLOWERS HOSPITAL	010055	AL
ST. VINCENT'S BIRMINGHAM	010056	AL
BIBB MEDICAL CENTER	010058	AL
LAWRENCE MEDICAL CENTER	010059	AL
HIGHLANDS MEDICAL CENTER	010061	AL
WIREGRASS MEDICAL CENTER	010062	AL
RUSSELL MEDICAL CENTER	010065	AL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient





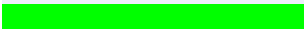
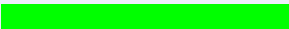




























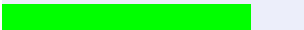
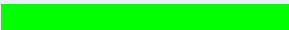


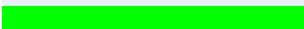
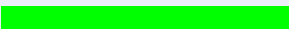


IP-Acute

Based on Spending Breakdown by Claim

\$7352.00	\$8069.00	\$8294.00
\$6441.00	\$8069.00	\$8294.00
\$6740.00	\$8069.00	\$8294.00
\$10138.00	\$8069.00	\$8294.00
\$8913.00	\$8069.00	\$8294.00
\$5982.00	\$8069.00	\$8294.00
\$5438.00	\$8069.00	\$8294.00
\$5822.00	\$8069.00	\$8294.00
\$7415.00	\$8069.00	\$8294.00
\$4811.00	\$8069.00	\$8294.00
\$6288.00	\$8069.00	\$8294.00
\$5359.00	\$8069.00	\$8294.00
\$4679.00	\$8069.00	\$8294.00
\$5998.00	\$8069.00	\$8294.00
\$8768.00	\$8069.00	\$8294.00
\$9497.00	\$8069.00	\$8294.00
\$5213.00	\$8069.00	\$8294.00
\$6221.00	\$8069.00	\$8294.00
\$5558.00	\$8069.00	\$8294.00
\$5779.00	\$8069.00	\$8294.00
\$7518.00	\$8069.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.56%		46.64%
	43.8%		46.64%
	46.56%		46.64%
	48.55%		46.64%
	45.29%		46.64%
	45.52%		46.64%
	44.72%		46.64%
	42.52%		46.64%
	42.79%		46.64%
	43.05%		46.64%
	44.43%		46.64%
	36.68%		46.64%
	53.43%		46.64%
	43.82%		46.64%
	49.59%		46.64%
	47.37%		46.64%
	35.24%		46.64%
	45.9%		46.64%
	46.18%		46.64%
	40.19%		46.64%
	46.17%		46.64%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

FLORALA MEMORIAL HOSPITAL	010066	AL
MEDICAL CENTER BARBOUR	010069	AL
CLAY COUNTY HOSPITAL	010073	AL
NORTHEAST ALABAMA REGIONAL MED CENTER	010078	AL
ATHENS-LIMESTONE HOSPITAL	010079	AL
SOUTH BALDWIN REGIONAL MEDICAL CENTER	010083	AL
DECATUR GENERAL HOSPITAL	010085	AL
NORTHWEST MEDICAL CENTER	010086	AL
UNIV OF SOUTH ALABAMA MEDICAL CENTER	010087	AL
WALKER BAPTIST MEDICAL CENTER	010089	AL
PROVIDENCE HOSPITAL	010090	AL
GROVE HILL MEMORIAL HOSPITAL	010091	AL
D C H REGIONAL MEDICAL CENTER	010092	AL
HALE COUNTY HOSPITAL	010095	AL
ELMORE COMMUNITY HOSPITAL	010097	AL
D W MCMILLAN MEMORIAL HOSPITAL	010099	AL
THOMAS HOSPITAL	010100	AL
CITIZENS BMC	010101	AL
J PAUL JONES HOSPITAL	010102	AL
BAPTIST MEDICAL CENTER-PRINCETON	010103	AL
TRINITY MEDICAL CENTER	010104	AL
PRATTVILLE BAPTIST HOSPITAL	010108	AL

IP-Acute

Based on Spending Breakdown by Claim

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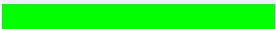
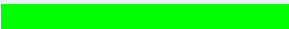
















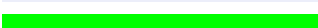
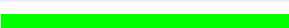
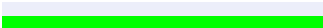
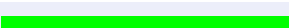
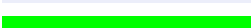
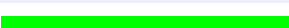
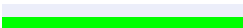
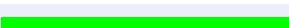
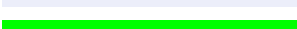
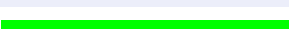
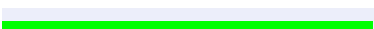
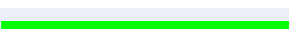
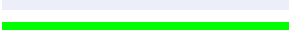
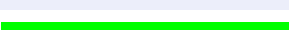
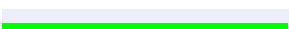
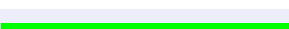
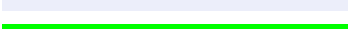
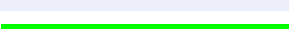


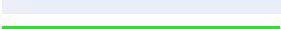
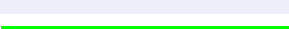
IP-Acute

Based on Spending Breakdown by Claim

\$4427.00	\$8069.00	\$8294.00
\$4735.00	\$8069.00	\$8294.00
\$5210.00	\$8069.00	\$8294.00
\$8263.00	\$8069.00	\$8294.00
\$6396.00	\$8069.00	\$8294.00
\$6478.00	\$8069.00	\$8294.00
\$7717.00	\$8069.00	\$8294.00
\$5892.00	\$8069.00	\$8294.00
\$10066.00	\$8069.00	\$8294.00
\$7423.00	\$8069.00	\$8294.00
\$9634.00	\$8069.00	\$8294.00
\$4682.00	\$8069.00	\$8294.00
\$8053.00	\$8069.00	\$8294.00
\$4556.00	\$8069.00	\$8294.00
\$4317.00	\$8069.00	\$8294.00
\$4864.00	\$8069.00	\$8294.00
\$9368.00	\$8069.00	\$8294.00
\$5704.00	\$8069.00	\$8294.00
\$4569.00	\$8069.00	\$8294.00
\$9357.00	\$8069.00	\$8294.00
\$9144.00	\$8069.00	\$8294.00
\$5504.00	\$8069.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	38.79%		46.64%
	37.91%		46.64%
	38.72%		46.64%
	45.55%		46.64%
	42.52%		46.64%
	42.46%		46.64%
	44.9%		46.64%
	40.73%		46.64%
	50.02%		46.64%
	45.85%		46.64%
	49.57%		46.64%
	44.94%		46.64%
	45.55%		46.64%
	35.53%		46.64%
	34.47%		46.64%
	42.07%		46.64%
	52.65%		46.64%
	40.75%		46.64%
	40.6%		46.64%
	49.41%		46.64%
	50.45%		46.64%
	39.44%		46.64%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

PICKENS COUNTY MEDICAL CENTER	010109	AL
BULLOCK COUNTY HOSPITAL	010110	AL
BRYAN W WHITFIELD MEM HOSP INC	010112	AL
MOBILE INFIRMARY	010113	AL
MEDICAL WEST	010114	AL
VAUGHAN REGIONAL MEDICAL CENTER, LLC	010118	AL
MONROE COUNTY HOSPITAL	010120	AL
LAKELAND COMMUNITY HOSPITAL	010125	AL
TROY REGIONAL MEDICAL CENTER	010126	AL
JACKSON MEDICAL CENTER	010128	AL
NORTH BALDWIN INFIRMARY	010129	AL
ST VINCENT'S ST CLAIR	010130	AL
CRESTWOOD MEDICAL CENTER	010131	AL
COOPER GREEN MERCY HOSPITAL	010137	AL
HILL HOSPITAL OF SUMTER COUNTY	010138	AL
BROOKWOOD MEDICAL CENTER	010139	AL
SPRINGHILL MEDICAL CENTER	010144	AL
JACKSONVILLE MEDICAL CENTER	010146	AL
EVERGREEN MEDICAL CENTER	010148	AL
BAPTIST MEDICAL CENTER EAST	010149	AL
L V STABLER MEMORIAL HOSPITAL	010150	AL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$6446.00	\$8069.00	\$8294.00
\$5050.00	\$8069.00	\$8294.00
\$5082.00	\$8069.00	\$8294.00
\$8862.00	\$8069.00	\$8294.00
\$7496.00	\$8069.00	\$8294.00
\$7720.00	\$8069.00	\$8294.00
\$5265.00	\$8069.00	\$8294.00
\$5606.00	\$8069.00	\$8294.00
\$6159.00	\$8069.00	\$8294.00
\$4798.00	\$8069.00	\$8294.00
\$6203.00	\$8069.00	\$8294.00
\$5241.00	\$8069.00	\$8294.00
\$8222.00	\$8069.00	\$8294.00
\$6861.00	\$8069.00	\$8294.00
\$4078.00	\$8069.00	\$8294.00
\$8689.00	\$8069.00	\$8294.00
\$9160.00	\$8069.00	\$8294.00
\$4990.00	\$8069.00	\$8294.00
\$5088.00	\$8069.00	\$8294.00
\$6533.00	\$8069.00	\$8294.00
\$5898.00	\$8069.00	\$8294.00

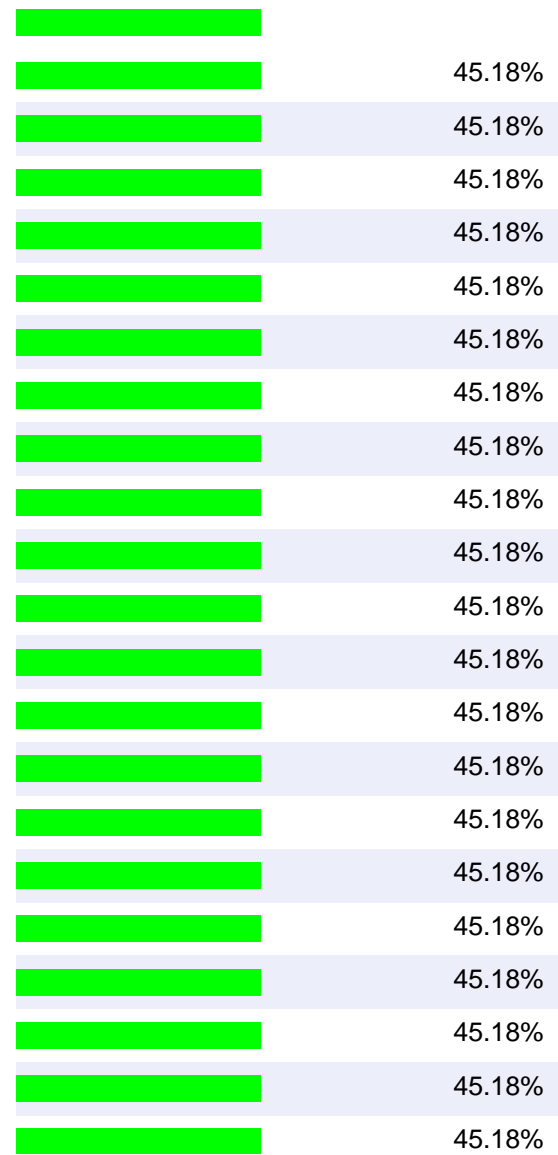
IP-Acute

Based on Spending Breakdown by Claim

	45.08%		46.64%
	43.19%		46.64%
	44.95%		46.64%
	48.57%		46.64%
	44.38%		46.64%
	45.46%		46.64%
	40.23%		46.64%
	44.83%		46.64%
	40.44%		46.64%
	41.49%		46.64%
	48.27%		46.64%
	44.59%		46.64%
	47.88%		46.64%
	49.58%		46.64%
	36.25%		46.64%
	45.97%		46.64%
	48.9%		46.64%
	38.67%		46.64%
	46.66%		46.64%
	43%		46.64%
	43.16%		46.64%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

INFIRMARY WEST	010152	AL
SHOALS HOSPITAL	010157	AL
RUSSELLVILLE HOSPITAL	010158	AL
COOSA VALLEY MEDICAL CENTER	010164	AL
JACK HUGHSTON MEMORIAL HOSPITAL	010168	AL
ATMORE COMMUNITY HOSPITAL	010169	AL
PROVIDENCE ALASKA MEDICAL CENTER	020001	AK
MAT-SU REGIONAL MEDICAL CENTER	020006	AK
BARTLETT REGIONAL HOSPITAL	020008	AK
FAIRBANKS MEMORIAL HOSPITAL	020012	AK
ALASKA REGIONAL HOSPITAL	020017	AK
YUKON KUSKOKWIM DELTA REG HOSPITAL	020018	AK
CENTRAL PENINSULA GENERAL HOSPITAL	020024	AK
ALASKA NATIVE MEDICAL CENTER	020026	AK
MT EDGECEMBE HOSPITAL	020027	AK
MARYVALE HOSPITAL	030001	AZ
BANNER GOOD SAMARITAN MEDICAL CENTER	030002	AZ
TUCSON MEDICAL CENTER	030006	AZ
VERDE VALLEY MEDICAL CENTER	030007	AZ
CARONDELET ST MARYS HOSPITAL	030010	AZ
CARONDELET ST JOSEPHS HOSPITAL	030011	AZ

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7179.00	\$8069.00	\$8294.00
\$6713.00	\$8069.00	\$8294.00
\$6365.00	\$8069.00	\$8294.00
\$5620.00	\$8069.00	\$8294.00
\$11236.00	\$8069.00	\$8294.00
\$5797.00	\$8069.00	\$8294.00
\$9578.00	\$8817.00	\$8294.00
\$7033.00	\$8817.00	\$8294.00
\$7143.00	\$8817.00	\$8294.00
\$8447.00	\$8817.00	\$8294.00
\$10945.00	\$8817.00	\$8294.00
\$5000.00	\$8817.00	\$8294.00
\$8355.00	\$8817.00	\$8294.00
\$7600.00	\$8817.00	\$8294.00
\$5859.00	\$8817.00	\$8294.00
\$6979.00	\$8838.00	\$8294.00
\$10536.00	\$8838.00	\$8294.00
\$9438.00	\$8838.00	\$8294.00
\$8289.00	\$8838.00	\$8294.00
\$8478.00	\$8838.00	\$8294.00
\$8883.00	\$8838.00	\$8294.00

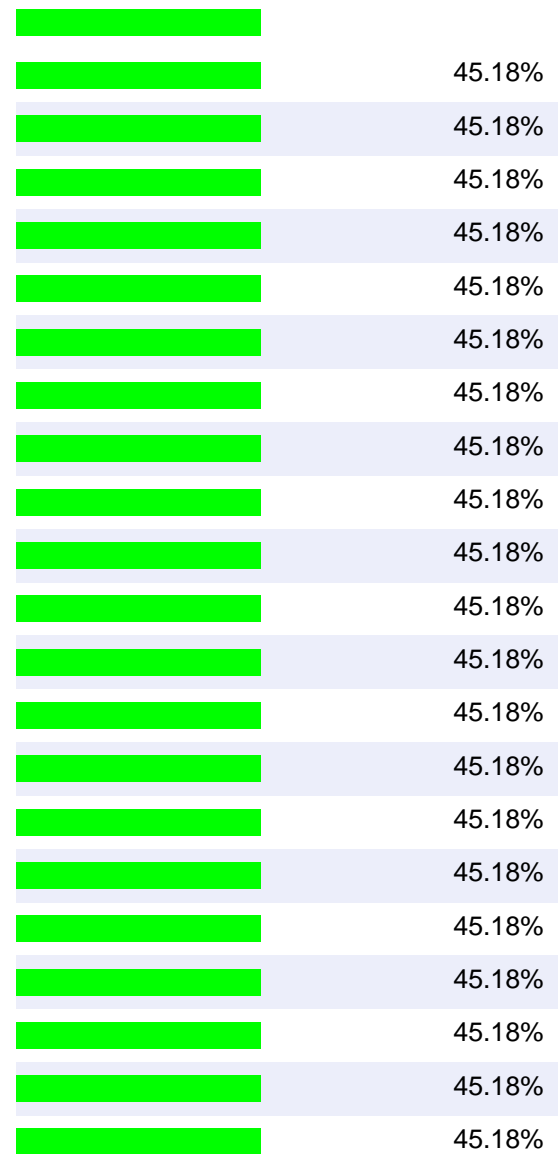
IP-Acute

Based on Spending Breakdown by Claim

	40.33%		46.64%
	40.65%		46.64%
	47.95%		46.64%
	43.66%		46.64%
	55.78%		46.64%
	42.79%		46.64%
	59.11%		50.3%
	58.92%		50.3%
	54.42%		50.3%
	63.75%		50.3%
	62.6%		50.3%
	54.49%		50.3%
	59.33%		50.3%
	61.97%		50.3%
	48.67%		50.3%
	43.79%		48.28%
	50.67%		48.28%
	48.06%		48.28%
	46.91%		48.28%
	45.06%		48.28%
	45.38%		48.28%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

YAVAPAI REGIONAL MEDICAL CENTER	030012	AZ
YUMA REGIONAL MEDICAL CENTER	030013	AZ
JOHN C LINCOLN NORTH MOUNTAIN HOSPITAL	030014	AZ
CASA GRANDE REGIONAL MEDICAL CENTER	030016	AZ
MARICOPA MEDICAL CENTER	030022	AZ
FLAGSTAFF MEDICAL CENTER	030023	AZ
ST JOSEPH'S HOSPITAL AND MEDICAL CENTER	030024	AZ
PHOENIX BAPTIST HOSPITAL	030030	AZ
PAYSON REGIONAL MEDICAL CENTER	030033	AZ
CHANDLER REGIONAL MEDICAL CENTER	030036	AZ
ST LUKES MEDICAL CENTER	030037	AZ
SCOTTSDALE HEALTHCARE-OSBORN MEDICAL CENTER	030038	AZ
SIERRA VISTA REGIONAL HEALTH CENTER INC	030043	AZ
KINGMAN REGIONAL MEDICAL CENTER	030055	AZ
BANNER BOSWELL MEDICAL CENTER	030061	AZ
SUMMIT HEALTHCARE REGIONAL MEDICAL CENTER	030062	AZ
UNIVERSITY OF ARIZONA MEDICAL CTR- UNIVERSITY, THE	030064	AZ
BANNER DESERT MEDICAL CENTER	030065	AZ
LA PAZ REGIONAL HOSPITAL	030067	AZ

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$8800.00	\$8838.00	\$8294.00
\$8348.00	\$8838.00	\$8294.00
\$8682.00	\$8838.00	\$8294.00
\$7440.00	\$8838.00	\$8294.00
\$8723.00	\$8838.00	\$8294.00
\$11038.00	\$8838.00	\$8294.00
\$11283.00	\$8838.00	\$8294.00
\$11610.00	\$8838.00	\$8294.00
\$7520.00	\$8838.00	\$8294.00
\$8775.00	\$8838.00	\$8294.00
\$10147.00	\$8838.00	\$8294.00
\$9226.00	\$8838.00	\$8294.00
\$6907.00	\$8838.00	\$8294.00
\$8157.00	\$8838.00	\$8294.00
\$8518.00	\$8838.00	\$8294.00
\$8434.00	\$8838.00	\$8294.00
\$9285.00	\$8838.00	\$8294.00
\$8392.00	\$8838.00	\$8294.00
\$7261.00	\$8838.00	\$8294.00

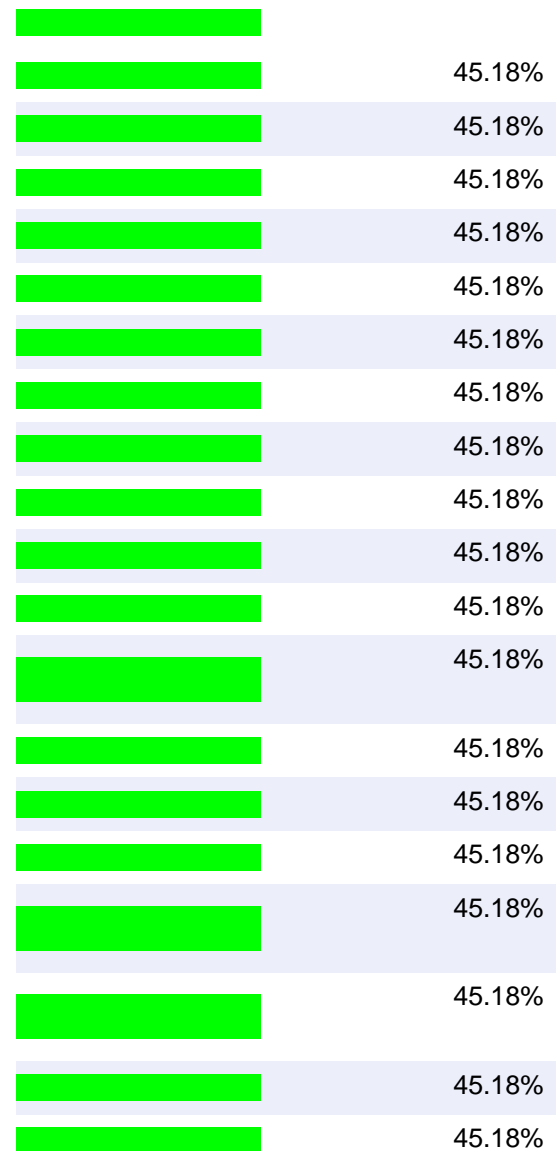
IP-Acute

Based on Spending Breakdown by Claim

	49.81%		48.28%
	45.55%		48.28%
	47.47%		48.28%
	47.92%		48.28%
	44.63%		48.28%
	56.16%		48.28%
	48.35%		48.28%
	52.14%		48.28%
	48.27%		48.28%
	46.03%		48.28%
	52.35%		48.28%
	43.38%		48.28%
	45.01%		48.28%
	49.38%		48.28%
	47.31%		48.28%
	55.09%		48.28%
	49.1%		48.28%
	47.44%		48.28%
	55.76%		48.28%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

MT GRAHAM REGIONAL MEDICAL CENTER	030068	AZ
HAVASU REGIONAL MEDICAL CENTER	030069	AZ
FORT DEFIANCE INDIAN HOSPITAL	030071	AZ
TUBA CITY REGIONAL HEALTH CARE CORPORATION	030073	AZ
PHOENIX INDIAN MEDICAL CENTER	030078	AZ
PARADISE VALLEY HOSPITAL	030083	AZ
CHINLE COMPREHENSIVE HEALTH CARE FACILITY	030084	AZ
NORTHWEST MEDICAL CENTER	030085	AZ
SCOTTSDALE HEALTHCARE-SHEA MEDICAL CENTER	030087	AZ
BANNER BAYWOOD MEDICAL CENTER	030088	AZ
BANNER THUNDERBIRD MEDICAL CENTER	030089	AZ
JOHN C LINCOLN DEER VALLEY HOSPITAL	030092	AZ
BANNER DEL E WEBB MEDICAL CENTER	030093	AZ
ARROWHEAD HOSPITAL	030094	AZ
CARONDELET HEART AND VASCULAR INSTITUTE	030100	AZ
WESTERN ARIZONA REGIONAL MEDICAL CTR	030101	AZ
MAYO CLINIC HOSPITAL	030103	AZ
BANNER HEART HOSPITAL	030105	AZ
ARIZONA SPINE AND JOINT HOSPITAL	030107	AZ

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$6846.00	\$8838.00	\$8294.00
\$8452.00	\$8838.00	\$8294.00
\$5090.00	\$8838.00	\$8294.00
\$6285.00	\$8838.00	\$8294.00
\$7187.00	\$8838.00	\$8294.00
\$7858.00	\$8838.00	\$8294.00
\$5271.00	\$8838.00	\$8294.00
\$8958.00	\$8838.00	\$8294.00
\$10078.00	\$8838.00	\$8294.00
\$7196.00	\$8838.00	\$8294.00
\$8369.00	\$8838.00	\$8294.00
\$9175.00	\$8838.00	\$8294.00
\$7535.00	\$8838.00	\$8294.00
\$8424.00	\$8838.00	\$8294.00
\$12023.00	\$8838.00	\$8294.00
\$7763.00	\$8838.00	\$8294.00
\$10695.00	\$8838.00	\$8294.00
\$16350.00	\$8838.00	\$8294.00
\$12574.00	\$8838.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	47.52%		48.28%
	54.8%		48.28%
	59.22%		48.28%
	61.89%		48.28%
	69.87%		48.28%
	45.65%		48.28%
	59.93%		48.28%
	46.54%		48.28%
	48.69%		48.28%
	41.79%		48.28%
	45.78%		48.28%
	52.67%		48.28%
	44.6%		48.28%
	47.47%		48.28%
	58.78%		48.28%
	50.11%		48.28%
	53.37%		48.28%
	66.29%		48.28%
	56.84%		48.28%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

SURGICAL SPECIALTY HOSPITAL OF ARIZONA, LLC.	030108	AZ
WEST VALLEY HOSPITAL	030110	AZ
UNIVERSITY OF ARIZONA MEDICAL CENTER-SOUTH CAMPUS	030111	AZ
ARIZONA ORTHOPEDIC SURGICAL HOSPITAL	030112	AZ
WHITERIVER PHS INDIAN HOSPITAL	030113	AZ
ORO VALLEY HOSPITAL	030114	AZ
BANNER ESTRELLA MEDICAL CENTER	030115	AZ
VALLEY VIEW MEDICAL CENTER	030117	AZ
YAVAPAI REGIONAL MEDICAL CENTER-EAST	030118	AZ
MERCY GILBERT MEDICAL CENTER	030119	AZ
GILBERT HOSPITAL	030120	AZ
MOUNTAIN VISTA MEDICAL CENTER, LP	030121	AZ
BANNER GATEWAY MEDICAL CENTER	030122	AZ
SCOTTSDALE HEALTHCARE-THOMPSON PEAK HOSPITAL	030123	AZ
ARIZONA REGIONAL MEDICAL CENTER	030126	AZ
BANNER IRONWOOD MEDICAL CENTER	030130	AZ
OASIS HOSPITAL	030131	AZ
SILOAM SPRINGS MEMORIAL HOSPITAL	040001	AR
JOHNSON REGIONAL MEDICAL CENTER	040002	AR

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$11635.00	\$8838.00	\$8294.00
\$7670.00	\$8838.00	\$8294.00
\$6529.00	\$8838.00	\$8294.00
\$11660.00	\$8838.00	\$8294.00
\$5041.00	\$8838.00	\$8294.00
\$7826.00	\$8838.00	\$8294.00
\$7992.00	\$8838.00	\$8294.00
\$7018.00	\$8838.00	\$8294.00
\$7475.00	\$8838.00	\$8294.00
\$8610.00	\$8838.00	\$8294.00
\$5879.00	\$8838.00	\$8294.00
\$9160.00	\$8838.00	\$8294.00
\$7467.00	\$8838.00	\$8294.00
\$10300.00	\$8838.00	\$8294.00
\$9054.00	\$8838.00	\$8294.00
\$6167.00	\$8838.00	\$8294.00
\$12118.00	\$8838.00	\$8294.00
\$5578.00	\$8160.00	\$8294.00
\$5383.00	\$8160.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	63.2%		48.28%
	47.68%		48.28%
	46.29%		48.28%
	49.82%		48.28%
	58.93%		48.28%
	48.61%		48.28%
	47.43%		48.28%
	47.14%		48.28%
	46.07%		48.28%
	45.27%		48.28%
	48.49%		48.28%
	45.59%		48.28%
	46.05%		48.28%
	51.13%		48.28%
	51.2%		48.28%
	43.39%		48.28%
	57.12%		48.28%
	40.62%		47.14%
	43.34%		47.14%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

WASHINGTON REGIONAL MED CTR AT NORTH HILLS	040004	AR
ST VINCENT INFIRMARY MED CTR	040007	AR
MERCY HOSPITAL NORTHWEST ARKANSAS	040010	AR
CHAMBERS MEMORIAL HOSPITAL	040011	AR
WHITE COUNTY MEDICAL CENTER	040014	AR
MENA REGIONAL HEALTH SYSTEM	040015	AR
UAMS MEDICAL CENTER	040016	AR
NORTH ARKANSAS REGIONAL MEDICAL CENTER	040017	AR
SUMMIT MEDICAL CENTER	040018	AR
FORREST CITY MEDICAL CENTER	040019	AR
ST BERNARDS MEDICAL CENTER	040020	AR
NW ARKANSAS HOSPITALS, LLC	040022	AR
MERCY HOSPITAL HOT SPRINGS	040026	AR
BAXTER REGIONAL MEDICAL CENTER	040027	AR
CONWAY REGIONAL MEDICAL CENTER	040029	AR
BAPTIST HEALTH MEDICAL CENTER - NLR	040036	AR
ARKANSAS METHODIST MEDICAL CENTER	040039	AR
ST MARYS RMC RUSSELLVILLE	040041	AR
CRITTENDEN REGIONAL HOSPITAL	040042	AR
GREAT RIVER MEDICAL CENTER	040069	AR

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

	\$8788.00	\$8160.00	\$8294.00
	\$9673.00	\$8160.00	\$8294.00
	\$9011.00	\$8160.00	\$8294.00
	\$5457.00	\$8160.00	\$8294.00
	\$6957.00	\$8160.00	\$8294.00
	\$5390.00	\$8160.00	\$8294.00
	\$9051.00	\$8160.00	\$8294.00
	\$6455.00	\$8160.00	\$8294.00
	\$5319.00	\$8160.00	\$8294.00
	\$5340.00	\$8160.00	\$8294.00
	\$8453.00	\$8160.00	\$8294.00
	\$7959.00	\$8160.00	\$8294.00
	\$8529.00	\$8160.00	\$8294.00
	\$7600.00	\$8160.00	\$8294.00
	\$8250.00	\$8160.00	\$8294.00
	\$8392.00	\$8160.00	\$8294.00
	\$6504.00	\$8160.00	\$8294.00
	\$6673.00	\$8160.00	\$8294.00
	\$6397.00	\$8160.00	\$8294.00
	\$5312.00	\$8160.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	48.01%		47.14%
	51.63%		47.14%
	49.06%		47.14%
	52.88%		47.14%
	44.34%		47.14%
	35.47%		47.14%
	47.42%		47.14%
	44.11%		47.14%
	38.27%		47.14%
	45.03%		47.14%
	48.21%		47.14%
	44.6%		47.14%
	47.77%		47.14%
	47.96%		47.14%
	45.87%		47.14%
	45.14%		47.14%
	41.15%		47.14%
	43.14%		47.14%
	38.72%		47.14%
	37.5%		47.14%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

FIVE RIVERS MEDICAL CENTER	040047	AR
OUACHITA COUNTY MEDICAL CENTER	040050	AR
DREW MEMORIAL HOSPITAL	040051	AR
SPARKS REGIONAL MEDICAL CENTER	040055	AR
MERCY HOSPITAL FORT SMITH	040062	AR
MAGNOLIA HOSPITAL	040067	AR
JEFFERSON REGIONAL MEDICAL CENTER	040071	AR
BAPTIST HEALTH MEDICAL CENTER - STUTTGART	040072	AR
NORTH METRO MEDICAL CENTER	040074	AR
HOT SPRING COUNTY MEDICAL CENTER	040076	AR
NATIONAL PARK MEDICAL CENTER	040078	AR
HARRIS HOSPITAL INC	040080	AR
SALINE MEMORIAL HOSPITAL	040084	AR
HELENA REGIONAL MEDICAL CENTER	040085	AR
MEDICAL CENTER SOUTH ARKANSAS	040088	AR
WADLEY REGIONAL MEDICAL CTR AT HOPE	040091	AR
BAPTIST HEALTH MEDICAL CENTER - LITTLE ROCK	040114	AR
NEA BAPTIST MEMORIAL HOSPITAL	040118	AR
WHITE RIVER MEDICAL CENTER	040119	AR
ARKANSAS HEART HOSPITAL	040134	AR
ST VINCENT MEDICAL CENTER NORTH	040137	AR

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





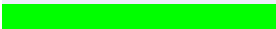
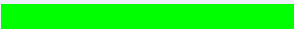
















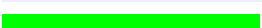
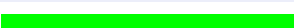
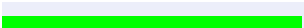
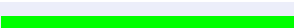
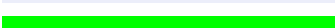
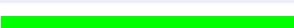
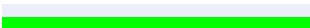
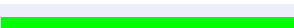
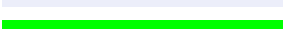
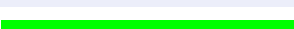






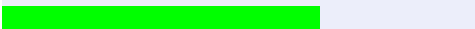
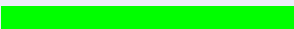


IP-Acute

Based on Spending Breakdown by Claim

\$5261.00	\$8160.00	\$8294.00
\$6189.00	\$8160.00	\$8294.00
\$5254.00	\$8160.00	\$8294.00
\$8248.00	\$8160.00	\$8294.00
\$8780.00	\$8160.00	\$8294.00
\$5860.00	\$8160.00	\$8294.00
\$8002.00	\$8160.00	\$8294.00
\$5534.00	\$8160.00	\$8294.00
\$6073.00	\$8160.00	\$8294.00
\$5193.00	\$8160.00	\$8294.00
\$8697.00	\$8160.00	\$8294.00
\$5321.00	\$8160.00	\$8294.00
\$6843.00	\$8160.00	\$8294.00
\$5672.00	\$8160.00	\$8294.00
\$7690.00	\$8160.00	\$8294.00
\$5928.00	\$8160.00	\$8294.00
\$8969.00	\$8160.00	\$8294.00
\$8710.00	\$8160.00	\$8294.00
\$7709.00	\$8160.00	\$8294.00
\$11314.00	\$8160.00	\$8294.00
\$6640.00	\$8160.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	36.83%		47.14%
	38.93%		47.14%
	38.79%		47.14%
	42.95%		47.14%
	47.19%		47.14%
	40.14%		47.14%
	43.07%		47.14%
	46.69%		47.14%
	36.94%		47.14%
	40.3%		47.14%
	47.17%		47.14%
	36.52%		47.14%
	42.51%		47.14%
	47.33%		47.14%
	43.72%		47.14%
	40.61%		47.14%
	48.52%		47.14%
	49.03%		47.14%
	45.05%		47.14%
	67.33%		47.14%
	41.09%		47.14%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

ARKANSAS SURGICAL HOSPITAL	040147	AR
PHYSICIANS SPECIALTY HOSPITAL	040152	AR
ST ROSE HOSPITAL	050002	CA
ST JOSEPH HOSPITAL	050006	CA
PENINSULA MEDICAL CENTER	050007	CA
CALIFORNIA PACIFIC MEDICAL CTR-DAVIES CAMPUS HOSP	050008	CA
QUEEN OF THE VALLEY MEDICAL CENTER	050009	CA
ST HELENA HOSPITAL	050013	CA
SUTTER AMADOR HOSPITAL	050014	CA
ARROYO GRANDE COMMUNITY HOSPITAL	050016	CA
MERCY GENERAL HOSPITAL	050017	CA
PACIFIC ALLIANCE MEDICAL CENTER	050018	CA
RIVERSIDE COMMUNITY HOSPITAL	050022	CA
PARADISE VALLEY HOSPITAL	050024	CA
UNIVERSITY OF CALIFORNIA SAN DIEGO MEDICAL CENTER	050025	CA
GROSSMONT HOSPITAL	050026	CA
MAD RIVER COMMUNITY HOSPITAL	050028	CA
OROVILLE HOSPITAL	050030	CA
BAKERSFIELD MEMORIAL HOSPITAL	050036	CA
SANTA CLARA VALLEY MEDICAL CENTER	050038	CA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





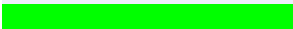
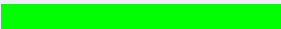






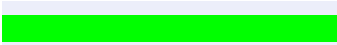
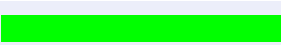
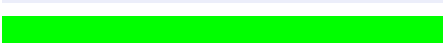
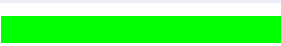
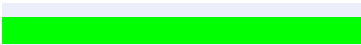
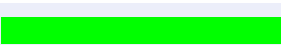
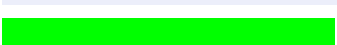
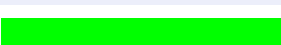
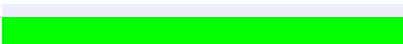
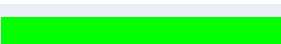


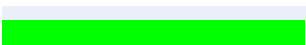
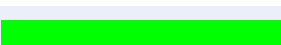
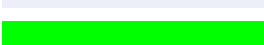
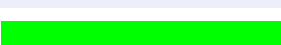
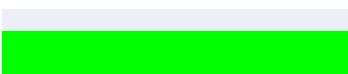
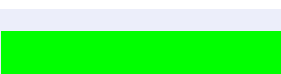
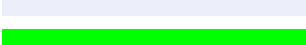
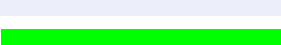
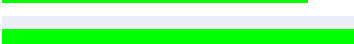
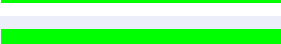
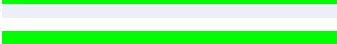
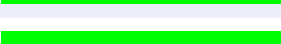




IP-Acute

Based on Spending Breakdown by Claim

\$10897.00	\$8160.00	\$8294.00
\$12958.00	\$8160.00	\$8294.00
\$7195.00	\$8616.00	\$8294.00
\$10047.00	\$8616.00	\$8294.00
\$8610.00	\$8616.00	\$8294.00
\$9432.00	\$8616.00	\$8294.00
\$8571.00	\$8616.00	\$8294.00
\$10405.00	\$8616.00	\$8294.00
\$7476.00	\$8616.00	\$8294.00
\$7680.00	\$8616.00	\$8294.00
\$11438.00	\$8616.00	\$8294.00
\$6606.00	\$8616.00	\$8294.00
\$9229.00	\$8616.00	\$8294.00
\$6546.00	\$8616.00	\$8294.00
\$9975.00	\$8616.00	\$8294.00
\$8427.00	\$8616.00	\$8294.00
\$6975.00	\$8616.00	\$8294.00
\$6924.00	\$8616.00	\$8294.00
\$8767.00	\$8616.00	\$8294.00
\$9241.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	62.1%		47.14%
	54.68%		47.14%
	41.26%		45.13%
	51.97%		45.13%
	50.98%		45.13%
	47.63%		45.13%
	47.49%		45.13%
	62.58%		45.13%
	51.22%		45.13%
	47.24%		45.13%
	56.93%		45.13%
	34.45%		45.13%
	42.97%		45.13%
	37.35%		45.13%
	49.04%		45.13%
	43.34%		45.13%
	50.04%		45.13%
	47.97%		45.13%
	44.47%		45.13%
	48.12%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

1	45.18%
2	45.18%
3	45.18%
4	45.18%
5	45.18%
6	45.18%
7	45.18%
8	45.18%
9	45.18%
10	45.18%
11	45.18%
12	45.18%
13	45.18%
14	45.18%
15	45.18%
16	45.18%
17	45.18%
18	45.18%
19	45.18%
20	45.18%

IP-Acute

Based on Spending Breakdown by Claim

ENLOE MEDICAL CENTER	050039	CA
LAC/OLIVE VIEW-UCLA MEDICAL CENTER	050040	CA
ST ELIZABETH COMMUNITY HOSPITAL	050042	CA
ALTA BATES SUMMIT MEDICAL CENTER -- SUMMIT CAMPUS	050043	CA
EL CENTRO REGIONAL MEDICAL CENTER	050045	CA
OJAI VALLEY COMMUNITY HOSPITAL	050046	CA
CALIFORNIA PACIFIC MEDICAL CTR-PACIFIC CAMPUS HOSP	050047	CA
SAN GORGONIO MEMORIAL HOSPITAL	050054	CA
CALIFORNIA PACIFIC MEDICAL CTR - ST. LUKE'S CAMPUS	050055	CA
ANTELOPE VALLEY HOSPITAL MED CENTER	050056	CA
KAWEAH DELTA MEDICAL CENTER	050057	CA
GLENDALE MEM HOSPITAL & HLTH CENTER	050058	CA
COMMUNITY REGIONAL MEDICAL CENTER	050060	CA
HOLLYWOOD PRESBYTERIAN MEDICAL CENTER	050063	CA
OAK VALLEY DISTRICT HOSPITAL	050067	CA
ST JOSEPH HOSPITAL OF ORANGE	050069	CA
KAISER FOUNDATION HOSPITAL - SOUTH SAN FRANCISCO	050070	CA
KAISER FOUNDATION HOSPITAL-SANTA CLARA	050071	CA
KAISER FOUNDATION HOSPITAL - WALNUT	050072	CA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





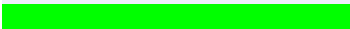
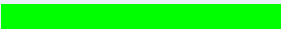


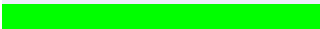
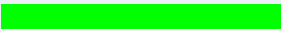






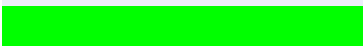
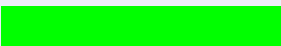


















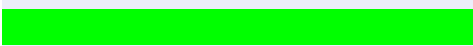
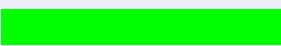
IP-Acute

Based on Spending Breakdown by Claim

\$8979.00	\$8616.00	\$8294.00
\$6191.00	\$8616.00	\$8294.00
\$7298.00	\$8616.00	\$8294.00
\$8373.00	\$8616.00	\$8294.00
\$6780.00	\$8616.00	\$8294.00
\$6801.00	\$8616.00	\$8294.00
\$10251.00	\$8616.00	\$8294.00
\$7277.00	\$8616.00	\$8294.00
\$7880.00	\$8616.00	\$8294.00
\$8138.00	\$8616.00	\$8294.00
\$8594.00	\$8616.00	\$8294.00
\$8586.00	\$8616.00	\$8294.00
\$8659.00	\$8616.00	\$8294.00
\$7859.00	\$8616.00	\$8294.00
\$6504.00	\$8616.00	\$8294.00
\$11027.00	\$8616.00	\$8294.00
\$8291.00	\$8616.00	\$8294.00
\$10456.00	\$8616.00	\$8294.00
\$7437.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.86%		45.13%
	39.23%		45.13%
	49.63%		45.13%
	44.2%		45.13%
	45.15%		45.13%
	49.95%		45.13%
	54.18%		45.13%
	38.46%		45.13%
	51.48%		45.13%
	44.98%		45.13%
	48.77%		45.13%
	43.97%		45.13%
	46.63%		45.13%
	36.03%		45.13%
	45.96%		45.13%
	48.39%		45.13%
	58.75%		45.13%
	60.08%		45.13%
	66.89%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

CREEK		
KAISER FOUNDATION HOSPITAL AND REHAB CENTER	050073	CA
KAISER FOUNDATION HOSPITAL OAKLAND/RICHMOND	050075	CA
KAISER FOUNDATION HOSPITAL - SAN FRANCISCO	050076	CA
SCRIPPS MERCY HOSPITAL	050077	CA
PROVIDENCE LITTLE CO OF MARY MED CTR SAN PEDRO	050078	CA
DOCTORS MEDICAL CENTER-SAN PABLO/PINOLE	050079	CA
ST JOHNS REGIONAL MEDICAL CENTER	050082	CA
ST JOSEPHS MEDICAL CENTER OF STOCKTON	050084	CA
COMMUNITY HOSPITAL OF SAN BERNARDINO	050089	CA
SONOMA VALLEY HOSPITAL	050090	CA
COMMUNITY AND MISSION HOSPITAL OF HUNTINGTON PARK	050091	CA
SAINT AGNES MEDICAL CENTER	050093	CA
DOCTORS HOSPITAL OF WEST COVINA, INC	050096	CA
SAN ANTONIO COMMUNITY HOSPITAL	050099	CA
SHARP MEMORIAL HOSPITAL	050100	CA
SUTTER SOLANO MEDICAL CENTER	050101	CA
PARKVIEW COMMUNITY HOSPITAL MEDICAL CENTER	050102	CA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

	\$8035.00	\$8616.00	\$8294.00
	\$7535.00	\$8616.00	\$8294.00
	\$10303.00	\$8616.00	\$8294.00
	\$8151.00	\$8616.00	\$8294.00
	\$7306.00	\$8616.00	\$8294.00
	\$7787.00	\$8616.00	\$8294.00
	\$8312.00	\$8616.00	\$8294.00
	\$8762.00	\$8616.00	\$8294.00
	\$6621.00	\$8616.00	\$8294.00
	\$7515.00	\$8616.00	\$8294.00
	\$6210.00	\$8616.00	\$8294.00
	\$8532.00	\$8616.00	\$8294.00
	\$7027.00	\$8616.00	\$8294.00
	\$8771.00	\$8616.00	\$8294.00
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	\$7749.00	\$8616.00	\$8294.00

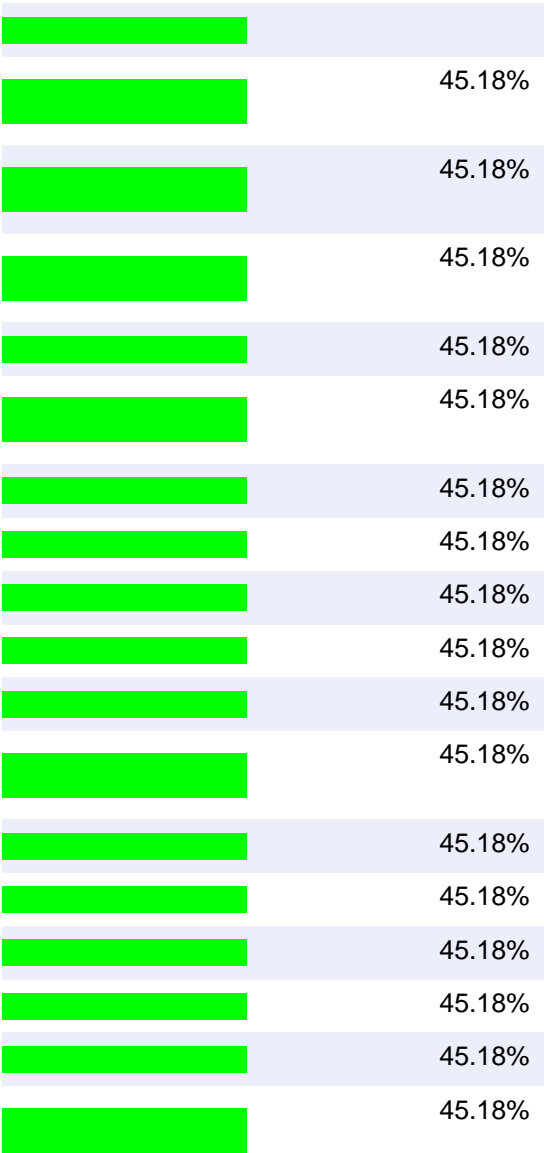
IP-Acute

Based on Spending Breakdown by Claim

	57.18%		45.13%
	56.67%		45.13%
	74.63%		45.13%
	41.18%		45.13%
	43.08%		45.13%
	43.56%		45.13%
	44.03%		45.13%
	44.62%		45.13%
	39.75%		45.13%
	42.93%		45.13%
	45.19%		45.13%
	45.76%		45.13%
	30.57%		45.13%
	39.24%		45.13%
	46.97%		45.13%
	40.23%		45.13%
	36.12%		45.13%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

CENTER

WHITE MEMORIAL MEDICAL CENTER	050103	CA
SAINT FRANCIS MEDICAL CENTER	050104	CA
MARIAN REGIONAL MEDICAL CENTER	050107	CA
SUTTER MEDICAL CENTER	050108	CA
LOMPOC VALLEY MEDICAL CENTER	050110	CA
TEMPLE COMMUNITY HOSPITAL	050111	CA
SANTA MONICA - UCLA MED CTR & ORTHOPAEDIC HOSPITAL	050112	CA
SAN MATEO MEDICAL CENTER	050113	CA
PALOMAR MEDICAL CENTER	050115	CA
NORTHRIDGE HOSPITAL MEDICAL CENTER	050116	CA
DOCTORS HOSPITAL OF MANTECA	050118	CA
ADVENTIST MEDICAL CENTER	050121	CA
DAMERON HOSPITAL	050122	CA
VERDUGO HILLS HOSPITAL	050124	CA
REGIONAL MEDICAL CENTER OF SAN JOSE	050125	CA
VALLEY PRESBYTERIAN HOSPITAL	050126	CA
WOODLAND MEMORIAL HOSPITAL	050127	CA
TRI-CITY MEDICAL CENTER	050128	CA
ST BERNARDINE MEDICAL CENTER	050129	CA
NOVATO COMMUNITY HOSPITAL	050131	CA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$8189.00	\$8616.00	\$8294.00
\$8266.00	\$8616.00	\$8294.00
\$8686.00	\$8616.00	\$8294.00
\$10353.00	\$8616.00	\$8294.00
\$6613.00	\$8616.00	\$8294.00
\$6055.00	\$8616.00	\$8294.00
\$8473.00	\$8616.00	\$8294.00
\$7138.00	\$8616.00	\$8294.00
\$8637.00	\$8616.00	\$8294.00
\$8206.00	\$8616.00	\$8294.00
\$6614.00	\$8616.00	\$8294.00
\$6790.00	\$8616.00	\$8294.00
\$9955.00	\$8616.00	\$8294.00
\$6992.00	\$8616.00	\$8294.00
\$8545.00	\$8616.00	\$8294.00
\$9041.00	\$8616.00	\$8294.00
\$7704.00	\$8616.00	\$8294.00
\$8141.00	\$8616.00	\$8294.00
\$9373.00	\$8616.00	\$8294.00
\$8228.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	39.54%		45.13%
	39.34%		45.13%
	48.65%		45.13%
	54.03%		45.13%
	49.02%		45.13%
	28.53%		45.13%
	41.75%		45.13%
	55.43%		45.13%
	43.7%		45.13%
	41.54%		45.13%
	42.2%		45.13%
	44.67%		45.13%
	46.22%		45.13%
	36.17%		45.13%
	44.53%		45.13%
	37.8%		45.13%
	47.01%		45.13%
	42.05%		45.13%
	44.5%		45.13%
	43.12%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

SAN GABRIEL VALLEY MEDICAL CENTER	050132	CA
RIDEOUT MEMORIAL HOSPITAL	050133	CA
HOLLYWOOD COMMUNITY HOSPITAL OF HOLLYWOOD	050135	CA
PETALUMA VALLEY HOSPITAL	050136	CA
KAISER FOUNDATION HOSPITAL - PANORAMA CITY	050137	CA
KAISER FOUNDATION HOSPITAL - LOS ANGELES	050138	CA
KAISER FOUNDATION HOSPITAL - DOWNEY	050139	CA
KAISER FOUNDATION HOSPITAL FONTANA	050140	CA
COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA	050145	CA
CALIFORNIA HOSPITAL MEDICAL CENTER LA	050149	CA
SIERRA NEVADA MEMORIAL HOSPITAL	050150	CA
SAINT FRANCIS MEMORIAL HOSPITAL	050152	CA
O'CONNOR HOSPITAL	050153	CA
ENCINO HOSPITAL MEDICAL CENTER	050158	CA
VENTURA COUNTY MEDICAL CENTER	050159	CA
SAN JOAQUIN GENERAL HOSPITAL	050167	CA
ST JUDE MEDICAL CENTER	050168	CA
PRESBYTERIAN INTERCOMMUNITY HOSPITAL	050169	CA
SANTA ROSA MEMORIAL HOSPITAL	050174	CA
EMANUEL MEDICAL CENTER INC	050179	CA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient









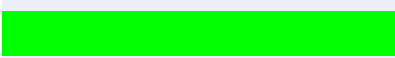
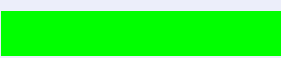






















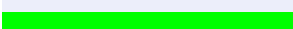
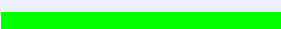


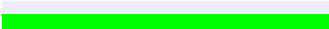
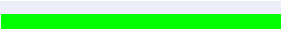
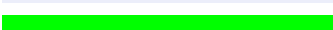
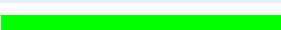
IP-Acute

Based on Spending Breakdown by Claim

\$7732.00	\$8616.00	\$8294.00
\$7965.00	\$8616.00	\$8294.00
\$6287.00	\$8616.00	\$8294.00
\$7696.00	\$8616.00	\$8294.00
\$7816.00	\$8616.00	\$8294.00
\$10240.00	\$8616.00	\$8294.00
\$9622.00	\$8616.00	\$8294.00
\$7574.00	\$8616.00	\$8294.00
\$9806.00	\$8616.00	\$8294.00
\$7562.00	\$8616.00	\$8294.00
\$7038.00	\$8616.00	\$8294.00
\$8489.00	\$8616.00	\$8294.00
\$9038.00	\$8616.00	\$8294.00
\$7883.00	\$8616.00	\$8294.00
\$7595.00	\$8616.00	\$8294.00
\$7460.00	\$8616.00	\$8294.00
\$8862.00	\$8616.00	\$8294.00
\$8847.00	\$8616.00	\$8294.00
\$9117.00	\$8616.00	\$8294.00
\$7532.00	\$8616.00	\$8294.00

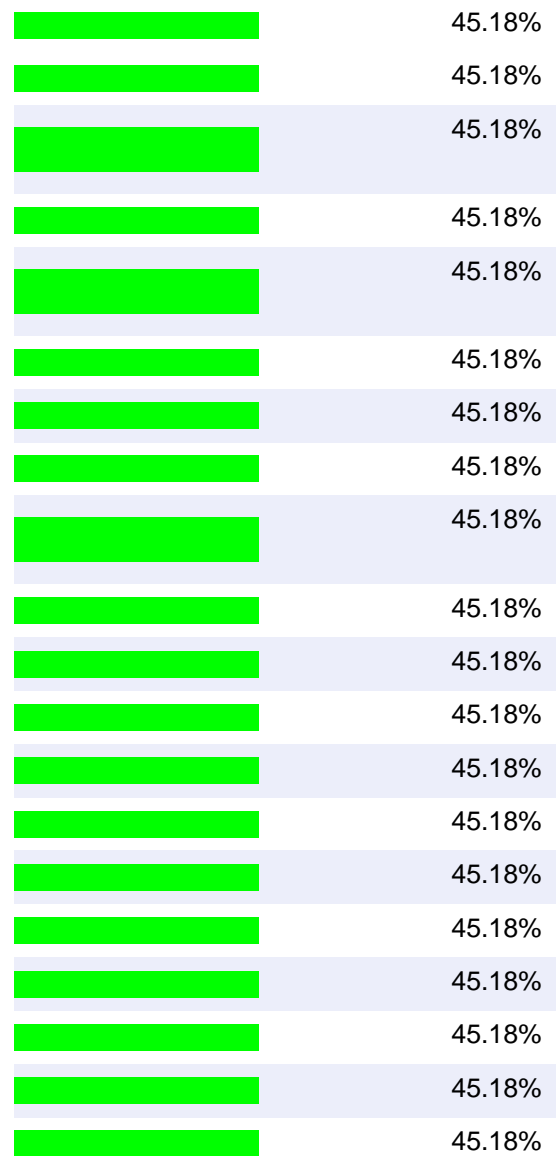
IP-Acute

Based on Spending Breakdown by Claim

	35.75%		45.13%
	50.02%		45.13%
	27.57%		45.13%
	43.29%		45.13%
	55.74%		45.13%
	57.14%		45.13%
	59.59%		45.13%
	47.73%		45.13%
	53.98%		45.13%
	42.68%		45.13%
	46.56%		45.13%
	43.78%		45.13%
	45.88%		45.13%
	37.49%		45.13%
	46.01%		45.13%
	44.69%		45.13%
	41.36%		45.13%
	41.91%		45.13%
	46.71%		45.13%
	47.21%		45.13%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

JOHN MUIR MEDICAL CENTER - WALNUT CREEK CAMPUS	050180	CA
GEORGE L MEE MEMORIAL HOSPITAL	050189	CA
ST MARY MEDICAL CENTER	050191	CA
ADVENTIST MEDICAL CENTER - REEDLEY	050192	CA
WATSONVILLE COMMUNITY HOSPITAL	050194	CA
WASHINGTON HOSPITAL	050195	CA
SEQUOIA HOSPITAL	050197	CA
PALMDALE REGIONAL MEDICAL CENTER	050204	CA
EAST VALLEY HOSPITAL MEDICAL CENTER	050205	CA
ALAMEDA HOSPITAL	050211	CA
SHARP CHULA VISTA MEDICAL CENTER	050222	CA
HOAG MEMORIAL HOSPITAL PRESBYTERIAN	050224	CA
FEATHER RIVER HOSPITAL	050225	CA
AHMC ANAHEIM REGIONAL MEDICAL CENTER	050226	CA
SAN FRANCISCO GENERAL HOSPITAL	050228	CA
GARDEN GROVE HOSPITAL & MEDICAL CENTER	050230	CA
POMONA VALLEY HOSPITAL MEDICAL CENTER	050231	CA
FRENCH HOSPITAL MEDICAL CENTER	050232	CA
SHARP CORONADO HOSPITAL AND HLTHCR CTR	050234	CA
PROVIDENCE SAINT JOSEPH MEDICAL CTR	050235	CA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

	\$9171.00	\$8616.00	\$8294.00
	\$6928.00	\$8616.00	\$8294.00
	\$8304.00	\$8616.00	\$8294.00
	\$4668.00	\$8616.00	\$8294.00
	\$7331.00	\$8616.00	\$8294.00
	\$9012.00	\$8616.00	\$8294.00
	\$10481.00	\$8616.00	\$8294.00
	\$7838.00	\$8616.00	\$8294.00
	\$6310.00	\$8616.00	\$8294.00
	\$6745.00	\$8616.00	\$8294.00
	\$8323.00	\$8616.00	\$8294.00
	\$10221.00	\$8616.00	\$8294.00
	\$7679.00	\$8616.00	\$8294.00
	\$7855.00	\$8616.00	\$8294.00
	\$8021.00	\$8616.00	\$8294.00
	\$7774.00	\$8616.00	\$8294.00
	\$8958.00	\$8616.00	\$8294.00
	\$9347.00	\$8616.00	\$8294.00
	\$7741.00	\$8616.00	\$8294.00
	\$8987.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	45.31%		45.13%
	47.68%		45.13%
	36.94%		45.13%
	38.88%		45.13%
	45.87%		45.13%
	47.65%		45.13%
	53.9%		45.13%
	44.53%		45.13%
	23.04%		45.13%
	40.41%		45.13%
	45.82%		45.13%
	45.69%		45.13%
	47.51%		45.13%
	39.89%		45.13%
	52.4%		45.13%
	34.73%		45.13%
	41.37%		45.13%
	52.75%		45.13%
	48.19%		45.13%
	44.57%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

SIMI VALLEY HOSPITAL & HEALTH CARE SERVICES	050236	CA
METHODIST HOSPITAL OF SOUTHERN CA	050238	CA
GLENDALE ADVENTIST MEDICAL CENTER	050239	CA
DOMINICAN HOSPITAL	050242	CA
DESERT REGIONAL MEDICAL CENTER	050243	CA
ARROWHEAD REGIONAL MEDICAL CENTER	050245	CA
NATIVIDAD MEDICAL CENTER	050248	CA
MARSHALL MEDICAL CENTER (1-RH)	050254	CA
GOOD SAMARITAN HOSPITAL	050257	CA
SIERRA VIEW DISTRICT HOSPITAL	050261	CA
UCLA MEDICAL CENTER	050262	CA
REDLANDS COMMUNITY HOSPITAL	050272	CA
CONTRA COSTA REGIONAL MEDICAL CENTER	050276	CA
PACIFIC HOSPITAL OF LONG BEACH	050277	CA
PROVIDENCE HOLY CROSS MEDICAL CENTER	050278	CA
HI-DESERT MEDICAL CENTER	050279	CA
MERCY MEDICAL CENTER REDDING	050280	CA
ALHAMBRA HOSPITAL MEDICAL CENTER	050281	CA
VALLEYCARE MEDICAL CENTER	050283	CA
SETON MEDICAL CENTER	050289	CA
SAINT JOHN'S HEALTH CENTER	050290	CA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient





















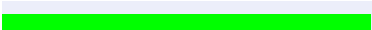
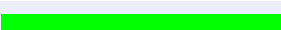
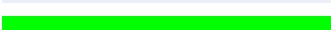
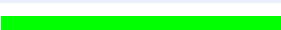
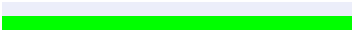
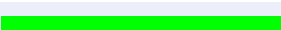
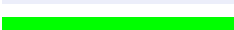
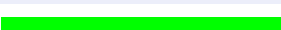
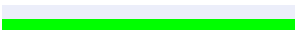
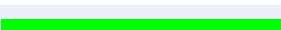
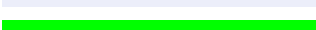
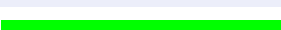
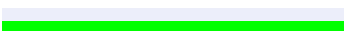
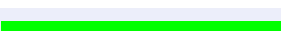


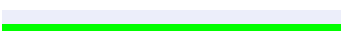
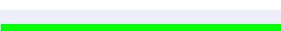
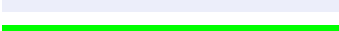
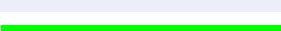
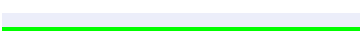
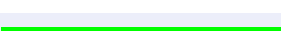
IP-Acute

Based on Spending Breakdown by Claim

\$7988.00	\$8616.00	\$8294.00
\$8433.00	\$8616.00	\$8294.00
\$8754.00	\$8616.00	\$8294.00
\$8153.00	\$8616.00	\$8294.00
\$8127.00	\$8616.00	\$8294.00
\$6843.00	\$8616.00	\$8294.00
\$5780.00	\$8616.00	\$8294.00
\$8056.00	\$8616.00	\$8294.00
\$5352.00	\$8616.00	\$8294.00
\$7045.00	\$8616.00	\$8294.00
\$11851.00	\$8616.00	\$8294.00
\$7954.00	\$8616.00	\$8294.00
\$6730.00	\$8616.00	\$8294.00
\$6200.00	\$8616.00	\$8294.00
\$8593.00	\$8616.00	\$8294.00
\$6602.00	\$8616.00	\$8294.00
\$9748.00	\$8616.00	\$8294.00
\$7863.00	\$8616.00	\$8294.00
\$9860.00	\$8616.00	\$8294.00
\$10368.00	\$8616.00	\$8294.00
\$10033.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.28%		45.13%
	40.64%		45.13%
	42.62%		45.13%
	47.37%		45.13%
	43.94%		45.13%
	42.4%		45.13%
	47.26%		45.13%
	51.36%		45.13%
	51.38%		45.13%
	44.44%		45.13%
	52.33%		45.13%
	46.87%		45.13%
	49.98%		45.13%
	32.85%		45.13%
	41.61%		45.13%
	44.71%		45.13%
	48.53%		45.13%
	31.34%		45.13%
	48.22%		45.13%
	48.04%		45.13%
	51.02%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

SUTTER MEDICAL CENTER OF SANTA ROSA	050291	CA
RIVERSIDE COUNTY REGIONAL MEDICAL CENTER	050292	CA
MERCY HOSPITAL	050295	CA
HAZEL HAWKINS MEMORIAL HOSPITAL	050296	CA
BARSTOW COMMUNITY HOSPITAL	050298	CA
ST MARY MEDICAL CENTER	050300	CA
UKIAH VALLEY MEDICAL CENTER/HOSPITAL D	050301	CA
ALTA BATES SUMMIT MEDICAL CENTER - ALTA BATES CAMPUS	050305	CA
EL CAMINO HOSPITAL	050308	CA
SUTTER ROSEVILLE MEDICAL CENTER	050309	CA
SUTTER TRACY COMMUNITY HOSPITAL	050313	CA
KERN MEDICAL CENTER	050315	CA
ALAMEDA COUNTY MEDICAL CENTER	050320	CA
SCRIPPS MEMORIAL HOSPITAL LA JOLLA	050324	CA
LOMA LINDA UNIVERSITY MEDICAL CENTER	050327	CA
CORONA REGIONAL MEDICAL CENTER	050329	CA
SALINAS VALLEY MEMORIAL HOSPITAL	050334	CA
SONORA REGIONAL MEDICAL CENTER	050335	CA
LODI MEMORIAL HOSPITAL	050336	CA
PIONEERS MEMORIAL HEALTHCARE DISTRICT	050342	CA
UNIVERSITY OF CALIFORNIA IRVINE MED CENTER	050348	CA

IP-Acute

Based on Spending Breakdown by Claim

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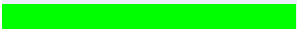
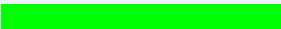
































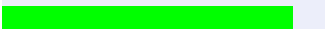
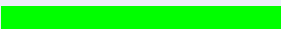


IP-Acute

Based on Spending Breakdown by Claim

\$10009.00	\$8616.00	\$8294.00
\$6722.00	\$8616.00	\$8294.00
\$8450.00	\$8616.00	\$8294.00
\$5851.00	\$8616.00	\$8294.00
\$6183.00	\$8616.00	\$8294.00
\$8046.00	\$8616.00	\$8294.00
\$6732.00	\$8616.00	\$8294.00
\$8228.00	\$8616.00	\$8294.00
\$9992.00	\$8616.00	\$8294.00
\$8116.00	\$8616.00	\$8294.00
\$6596.00	\$8616.00	\$8294.00
\$7057.00	\$8616.00	\$8294.00
\$6626.00	\$8616.00	\$8294.00
\$9947.00	\$8616.00	\$8294.00
\$10328.00	\$8616.00	\$8294.00
\$7145.00	\$8616.00	\$8294.00
\$9528.00	\$8616.00	\$8294.00
\$8589.00	\$8616.00	\$8294.00
\$7710.00	\$8616.00	\$8294.00
\$6901.00	\$8616.00	\$8294.00
\$10584.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	53.38%		45.13%
	51.27%		45.13%
	41.75%		45.13%
	43.04%		45.13%
	43.57%		45.13%
	49.06%		45.13%
	48.83%		45.13%
	43.94%		45.13%
	48.48%		45.13%
	47.44%		45.13%
	40.76%		45.13%
	55.29%		45.13%
	46.07%		45.13%
	50.6%		45.13%
	50.28%		45.13%
	37.25%		45.13%
	49.44%		45.13%
	53.3%		45.13%
	41.26%		45.13%
	45.67%		45.13%
	49.96%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

CORCORAN DISTRICT HOSPITAL	050349	CA
BEVERLY HOSPITAL	050350	CA
TORRANCE MEMORIAL MEDICAL CENTER	050351	CA
BARTON MEMORIAL HOSPITAL	050352	CA
PROVIDENCE LITTLE COMPANY OF MARY MED CTR TORRANCE	050353	CA
GOLETA VALLEY COTTAGE HOSPITAL	050357	CA
TULARE REGIONAL MEDICAL CENTER	050359	CA
MARIN GENERAL HOSPITAL	050360	CA
NORTHBAY MEDICAL CENTER	050367	CA
LAC+USC MEDICAL CENTER	050373	CA
LAC/HARBOR-UCLA MED CENTER	050376	CA
PACIFICA HOSPITAL OF THE VALLEY	050378	CA
GOOD SAMARITAN HOSPITAL	050380	CA
CITRUS VALLEY MEDICAL CENTER-IC CAMPUS	050382	CA
PALM DRIVE HOSPITAL	050385	CA
HEMET VALLEY MEDICAL CENTER	050390	CA
DOWNEY REGIONAL MEDICAL CENTER	050393	CA
COMMUNITY MEMORIAL HOSPITAL SAN BUENAVENTURA	050394	CA
SANTA BARBARA COTTAGE HOSPITAL	050396	CA
COALINGA REGIONAL MEDICAL CENTER	050397	CA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$4491.00	\$8616.00	\$8294.00
\$7625.00	\$8616.00	\$8294.00
\$8872.00	\$8616.00	\$8294.00
\$8905.00	\$8616.00	\$8294.00
\$8323.00	\$8616.00	\$8294.00
\$9366.00	\$8616.00	\$8294.00
\$6364.00	\$8616.00	\$8294.00
\$8544.00	\$8616.00	\$8294.00
\$8411.00	\$8616.00	\$8294.00
\$7244.00	\$8616.00	\$8294.00
\$8519.00	\$8616.00	\$8294.00
\$5428.00	\$8616.00	\$8294.00
\$9120.00	\$8616.00	\$8294.00
\$7933.00	\$8616.00	\$8294.00
\$8615.00	\$8616.00	\$8294.00
\$6912.00	\$8616.00	\$8294.00
\$7676.00	\$8616.00	\$8294.00
\$9243.00	\$8616.00	\$8294.00
\$9285.00	\$8616.00	\$8294.00
\$4826.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	59.83%		45.13%
	37.5%		45.13%
	47.23%		45.13%
	55.96%		45.13%
	43.93%		45.13%
	48.69%		45.13%
	45.06%		45.13%
	45.29%		45.13%
	47.13%		45.13%
	51.87%		45.13%
	50.11%		45.13%
	33.29%		45.13%
	46.62%		45.13%
	38.07%		45.13%
	49.01%		45.13%
	41%		45.13%
	37.9%		45.13%
	50.28%		45.13%
	50.63%		45.13%
	66.51%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

CHINESE HOSPITAL	050407	CA
KAISER FOUNDATION HOSPITAL - SOUTH BAY	050411	CA
MERCY HOSPITAL OF FOLSOM	050414	CA
SUTTER COAST HOSPITAL	050417	CA
PALO VERDE HOSPITAL	050423	CA
SCRIPPS GREEN HOSPITAL	050424	CA
KAISER FOUNDATION HOSPITAL - SACRAMENTO	050425	CA
WEST ANAHEIM MEDICAL CENTER	050426	CA
COLUSA REGIONAL MEDICAL CENTER	050434	CA
FALLBROOK HOSPITAL	050435	CA
HUNTINGTON MEMORIAL HOSPITAL	050438	CA
STANFORD HOSPITAL	050441	CA
MERCY MEDICAL CENTER	050444	CA
RIDGECREST REGIONAL HOSPITAL	050448	CA
UCSF MEDICAL CENTER	050454	CA
SAN JOAQUIN COMMUNITY HOSPITAL	050455	CA
ST MARY'S MEDICAL CENTER	050457	CA
DOCTORS MEDICAL CENTER	050464	CA
MEMORIAL HOSPITAL OF GARDENA	050468	CA
GOOD SAMARITAN HOSPITAL	050471	CA
WEST HILLS HOSPITAL & MEDICAL CENTER	050481	CA
LONG BEACH MEMORIAL MEDICAL CENTER	050485	CA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient

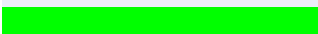
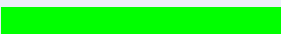


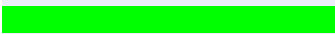
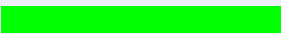














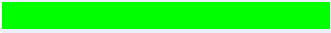
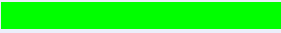






















IP-Acute

Based on Spending Breakdown by Claim

\$6437.00	\$8616.00	\$8294.00
\$7362.00	\$8616.00	\$8294.00
\$7526.00	\$8616.00	\$8294.00
\$6804.00	\$8616.00	\$8294.00
\$5021.00	\$8616.00	\$8294.00
\$11816.00	\$8616.00	\$8294.00
\$8328.00	\$8616.00	\$8294.00
\$7883.00	\$8616.00	\$8294.00
\$4931.00	\$8616.00	\$8294.00
\$6655.00	\$8616.00	\$8294.00
\$8362.00	\$8616.00	\$8294.00
\$11047.00	\$8616.00	\$8294.00
\$7944.00	\$8616.00	\$8294.00
\$6016.00	\$8616.00	\$8294.00
\$11518.00	\$8616.00	\$8294.00
\$7842.00	\$8616.00	\$8294.00
\$9011.00	\$8616.00	\$8294.00
\$9331.00	\$8616.00	\$8294.00
\$7454.00	\$8616.00	\$8294.00
\$9444.00	\$8616.00	\$8294.00
\$8809.00	\$8616.00	\$8294.00
\$8518.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	45.06%		45.13%
	57.12%		45.13%
	47.35%		45.13%
	51.35%		45.13%
	48.39%		45.13%
	59.4%		45.13%
	55.23%		45.13%
	36.23%		45.13%
	50.51%		45.13%
	47.24%		45.13%
	46.49%		45.13%
	53.62%		45.13%
	44.54%		45.13%
	48.41%		45.13%
	53.37%		45.13%
	42.3%		45.13%
	47.33%		45.13%
	49.61%		45.13%
	29.6%		45.13%
	47.41%		45.13%
	41.25%		45.13%
	42.38%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

EDEN MEDICAL CENTER	050488	CA
CLOVIS COMMUNITY MEDICAL CENTER	050492	CA
JOHN MUIR MEDICAL CENTER - CONCORD CAMPUS	050496	CA
SUTTER AUBURN FAITH HOSPITAL	050498	CA
SAINT VINCENT MEDICAL CENTER	050502	CA
SCRIPPS MEMORIAL HOSPITAL - ENCINITAS	050503	CA
SIERRA VISTA REGIONAL MEDICAL CENTER	050506	CA
KAISER FOUNDATION HOSPITAL	050510	CA
KAISER FOUNDATION HOSPITAL FREMONT/HAYWARD	050512	CA
KAISER FOUNDATION HOSPITAL - SAN DIEGO	050515	CA
MERCY SAN JUAN MEDICAL CENTER	050516	CA
VICTOR VALLEY COMMUNITY HOSPITAL	050517	CA
SUTTER DELTA MEDICAL CENTER	050523	CA
HUNTINGTON BEACH HOSPITAL	050526	CA
MEMORIAL HOSPITAL LOS BANOS	050528	CA
BELLFLOWER MEDICAL CENTER	050531	CA
JOHN F KENNEDY MEMORIAL HOSPITAL, INC	050534	CA
SUTTER DAVIS HOSPITAL	050537	CA
KAISER FOUNDATION HOSPITAL - REDWOOD CITY	050541	CA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7684.00	\$8616.00	\$8294.00
\$8041.00	\$8616.00	\$8294.00
\$9652.00	\$8616.00	\$8294.00
\$7831.00	\$8616.00	\$8294.00
\$9266.00	\$8616.00	\$8294.00
\$8849.00	\$8616.00	\$8294.00
\$8904.00	\$8616.00	\$8294.00
\$8107.00	\$8616.00	\$8294.00
\$8564.00	\$8616.00	\$8294.00
\$7215.00	\$8616.00	\$8294.00
\$8891.00	\$8616.00	\$8294.00
\$7176.00	\$8616.00	\$8294.00
\$7169.00	\$8616.00	\$8294.00
\$7807.00	\$8616.00	\$8294.00
\$6604.00	\$8616.00	\$8294.00
\$6000.00	\$8616.00	\$8294.00
\$8445.00	\$8616.00	\$8294.00
\$7199.00	\$8616.00	\$8294.00
\$8798.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.65%		45.13%
	43.19%		45.13%
	48.71%		45.13%
	49.16%		45.13%
	43.58%		45.13%
	44.62%		45.13%
	47.36%		45.13%
	54.98%		45.13%
	53.8%		45.13%
	69.09%		45.13%
	47.5%		45.13%
	48.1%		45.13%
	42.83%		45.13%
	34.41%		45.13%
	48.47%		45.13%
	32.4%		45.13%
	43.88%		45.13%
	46.04%		45.13%
	46.74%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

COLLEGE HOSPITAL COSTA MESA	050543	CA
SONOMA DEVELOPMENTAL CENTER	050547	CA
LOS ROBLES HOSPITAL & MEDICAL CENTER	050549	CA
LOS ALAMITOS MEDICAL CENTER	050551	CA
MOTION PICTURE & TELEVISION HOSPITAL	050552	CA
MEMORIAL MEDICAL CENTER	050557	CA
KAISER FOUNDATION HOSPITAL - WEST LA	050561	CA
MISSION HOSPITAL REGIONAL MED CENTER	050567	CA
MADERA COMMUNITY HOSPITAL	050568	CA
FOUNTAIN VALLEY REGIONAL HOSPITAL & MEDICAL CENTER	050570	CA
EISENHOWER MEDICAL CENTER	050573	CA
TRI-CITY REGIONAL MEDICAL CENTER	050575	CA
LA PALMA INTERCOMMUNITY HOSPITAL	050580	CA
LAKEWOOD REGIONAL MEDICAL CENTER	050581	CA
CHINO VALLEY MEDICAL CENTER	050586	CA
SAN DIMAS COMMUNITY HOSPITAL	050588	CA
PLACENTIA LINDA HOSPITAL	050589	CA
METHODIST HOSPITAL OF SACRAMENTO	050590	CA
FOOTHILL PRESBYTERIAN HOSPITAL	050597	CA
UNIVERSITY OF CALIFORNIA DAVIS MEDICAL CENTER	050599	CA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient




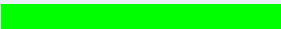



























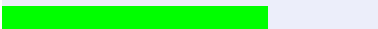
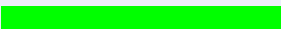
IP-Acute

Based on Spending Breakdown by Claim

\$5020.00	\$8616.00	\$8294.00
\$6117.00	\$8616.00	\$8294.00
\$9299.00	\$8616.00	\$8294.00
\$7125.00	\$8616.00	\$8294.00
\$5331.00	\$8616.00	\$8294.00
\$8672.00	\$8616.00	\$8294.00
\$8427.00	\$8616.00	\$8294.00
\$8484.00	\$8616.00	\$8294.00
\$6535.00	\$8616.00	\$8294.00
\$8836.00	\$8616.00	\$8294.00
\$8715.00	\$8616.00	\$8294.00
\$7763.00	\$8616.00	\$8294.00
\$7481.00	\$8616.00	\$8294.00
\$7530.00	\$8616.00	\$8294.00
\$7351.00	\$8616.00	\$8294.00
\$7007.00	\$8616.00	\$8294.00
\$7044.00	\$8616.00	\$8294.00
\$8012.00	\$8616.00	\$8294.00
\$7851.00	\$8616.00	\$8294.00
\$10265.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	39.79%		45.13%
	65.72%		45.13%
	48.22%		45.13%
	36.15%		45.13%
	44.79%		45.13%
	48.24%		45.13%
	56.64%		45.13%
	45.44%		45.13%
	41.84%		45.13%
	38.19%		45.13%
	47.21%		45.13%
	29.14%		45.13%
	34.99%		45.13%
	35.29%		45.13%
	42.92%		45.13%
	35.83%		45.13%
	40.84%		45.13%
	46.83%		45.13%
	37.78%		45.13%
	53.64%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

SADDLEBACK MEMORIAL MEDICAL CENTER	050603	CA
KAISER FOUNDATION HOSPITAL-SAN JOSE	050604	CA
DELANO REGIONAL MEDICAL CENTER	050608	CA
KAISER FOUNDATION HOSPITAL ANAHEIM	050609	CA
ST JOHNS PLEASANT VALLEY HOSPITAL	050616	CA
BEAR VALLEY COMMUNITY HOSPITAL	050618	CA
HENRY MAYO NEWHALL MEMORIAL HOSPITAL	050624	CA
CEDARS - SINAI MEDICAL CENTER	050625	CA
TWIN CITIES COMMUNITY HOSPITAL	050633	CA
POMERADO HOSPITAL	050636	CA
EAST LOS ANGELES DOCTORS HOSPITAL	050641	CA
LOS ANGELES METROPOLITAN MEDICAL CTR	050644	CA
LOS ANGELES COMMUNITY HOSPITAL	050663	CA
KAISER FOUNDATION HOSP SO SACRAMENTO	050674	CA
KAISER FOUNDATION HOSPITAL - WOODLAND HILLS	050677	CA
ORANGE COAST MEMORIAL MEDICAL CENTER	050678	CA
MENIFEE VALLEY MEDICAL CENTER	050684	CA
KAISER FOUNDATION HOSPITAL, RIVERSIDE	050686	CA
SAINT LOUISE REGIONAL HOSPITAL	050688	CA
SAN RAMON REGIONAL MEDICAL CTR	050689	CA
KAISER FOUNDATION HOSPITAL-SANTA ROSA	050690	CA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





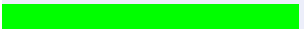
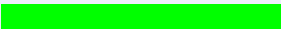
















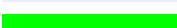
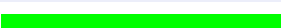
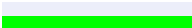
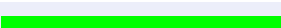
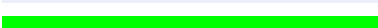
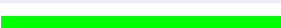
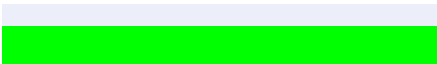
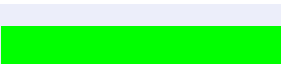
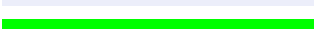
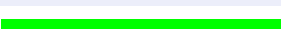
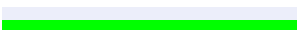
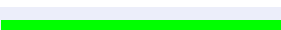


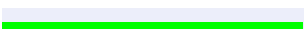
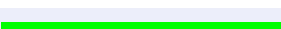
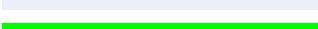
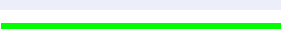


IP-Acute

Based on Spending Breakdown by Claim

\$8328.00	\$8616.00	\$8294.00
\$7388.00	\$8616.00	\$8294.00
\$6776.00	\$8616.00	\$8294.00
\$9097.00	\$8616.00	\$8294.00
\$7527.00	\$8616.00	\$8294.00
\$5782.00	\$8616.00	\$8294.00
\$8296.00	\$8616.00	\$8294.00
\$10493.00	\$8616.00	\$8294.00
\$6274.00	\$8616.00	\$8294.00
\$7836.00	\$8616.00	\$8294.00
\$7373.00	\$8616.00	\$8294.00
\$5851.00	\$8616.00	\$8294.00
\$6787.00	\$8616.00	\$8294.00
\$7895.00	\$8616.00	\$8294.00
\$8242.00	\$8616.00	\$8294.00
\$7667.00	\$8616.00	\$8294.00
\$6963.00	\$8616.00	\$8294.00
\$7549.00	\$8616.00	\$8294.00
\$8243.00	\$8616.00	\$8294.00
\$7865.00	\$8616.00	\$8294.00
\$8287.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.58%		45.13%
	48.34%		45.13%
	42.14%		45.13%
	42.89%		45.13%
	42.21%		45.13%
	41.46%		45.13%
	42.47%		45.13%
	49.72%		45.13%
	43.3%		45.13%
	43.97%		45.13%
	40.44%		45.13%
	24.83%		45.13%
	26.86%		45.13%
	53.27%		45.13%
	61.8%		45.13%
	44.35%		45.13%
	41.82%		45.13%
	59.45%		45.13%
	42.7%		45.13%
	44.98%		45.13%
	59.79%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

KECK HOSPITAL OF USC	050696	CA
PATIENTS' HOSPITAL OF REDDING	050697	CA
SOUTHWEST HEALTHCARE SYSTEM	050701	CA
MISSION COMMUNITY HOSPITAL - PANORAMA	050704	CA
FRESNO SURGICAL HOSPITAL	050708	CA
DESERT VALLEY HOSPITAL	050709	CA
SUTTER MATERNITY & SURGERY CENTER OF SANTA CRUZ	050714	CA
LAC/RANCHO LOS AMIGOS NATIONAL REHABILITATION CTR	050717	CA
KAISER FOUNDATION HOSPITAL - BALDWIN PARK	050723	CA
BAKERSFIELD HEART HOSPITAL	050724	CA
STANISLAUS SURGICAL HOSPITAL	050726	CA
FRESNO HEART AND SURGICAL HOSPITAL	050732	CA
WHITTIER HOSPITAL MEDICAL CENTER	050735	CA
MONTEREY PARK HOSPITAL	050736	CA
GARFIELD MEDICAL CENTER	050737	CA
GREATER EL MONTE COMMUNITY HOSPITAL	050738	CA
CENTINELA FREEMAN REGIONAL MEDICAL CENTER - CENTINELA CAMPUS	050739	CA
MARINA DEL REY HOSPITAL	050740	CA
OLYMPIA MEDICAL CENTER	050742	CA
WESTERN MEDICAL CENTER HOSP ANAHEIM	050744	CA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

















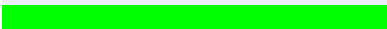
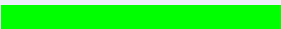


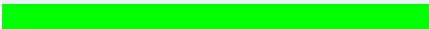
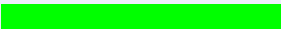


















IP-Acute

Based on Spending Breakdown by Claim

\$13741.00	\$8616.00	\$8294.00
\$7377.00	\$8616.00	\$8294.00
\$7475.00	\$8616.00	\$8294.00
\$7004.00	\$8616.00	\$8294.00
\$11133.00	\$8616.00	\$8294.00
\$7703.00	\$8616.00	\$8294.00
\$8933.00	\$8616.00	\$8294.00
\$11440.00	\$8616.00	\$8294.00
\$7133.00	\$8616.00	\$8294.00
\$9044.00	\$8616.00	\$8294.00
\$10420.00	\$8616.00	\$8294.00
\$13027.00	\$8616.00	\$8294.00
\$7136.00	\$8616.00	\$8294.00
\$6727.00	\$8616.00	\$8294.00
\$8091.00	\$8616.00	\$8294.00
\$7336.00	\$8616.00	\$8294.00
\$8555.00	\$8616.00	\$8294.00
\$9676.00	\$8616.00	\$8294.00
\$7824.00	\$8616.00	\$8294.00
\$11181.00	\$8616.00	\$8294.00

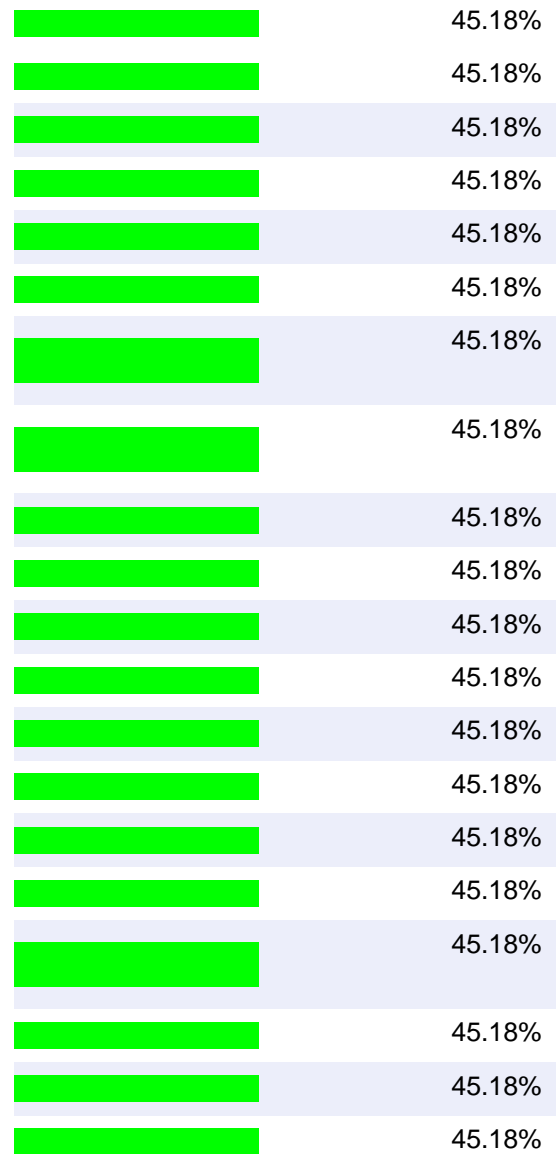
IP-Acute

Based on Spending Breakdown by Claim

	58.11%		45.13%
	68.91%		45.13%
	43.64%		45.13%
	34.33%		45.13%
	64.21%		45.13%
	51.69%		45.13%
	64.67%		45.13%
	33.59%		45.13%
	54.78%		45.13%
	51.36%		45.13%
	60.85%		45.13%
	65.36%		45.13%
	29.11%		45.13%
	40.6%		45.13%
	38.85%		45.13%
	29.33%		45.13%
	42.55%		45.13%
	46.32%		45.13%
	33.33%		45.13%
	40.51%		45.13%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

CHAPMAN MEDICAL CENTER	050745	CA
WESTERN MEDICAL CENTER SANTA ANA	050746	CA
COASTAL COMMUNITIES HOSPITAL	050747	CA
KAISER FOUNDATION HOSPITAL MANTECA	050748	CA
THOUSAND OAKS SURGICAL HOSPITAL	050749	CA
BROTMAN MEDICAL CENTER	050752	CA
SHERMAN OAKS HOSPITAL	050755	CA
ALVARADO HOSPITAL MEDICAL CENTER	050757	CA
MONTCLAIR HOSPITAL MEDICAL CENTER	050758	CA
KAISER FOUNDATION HOSPITAL - ANTIOCH	050760	CA
PROVIDENCE TARZANA MEDICAL CENTER	050761	CA
SILVER LAKE MEDICAL CENTER	050763	CA
SHASTA REGIONAL MEDICAL CENTER	050764	CA
KAISER FOUNDATION HOSPITAL-MORENO VALLEY	050765	CA
SUTTER SURGICAL HOSPITAL - NORTH VALLEY	050766	CA
ANAHEIM GENERAL HOSPITAL	050768	CA
HOAG ORTHOPEDIC INSTITUTE	050769	CA
LOMA LINDA UNIVERSITY MEDICAL CENTER-MURRIETA	050770	CA
COAST PLAZA HOSPITAL	050771	CA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$8317.00	\$8616.00	\$8294.00
\$9408.00	\$8616.00	\$8294.00
\$8102.00	\$8616.00	\$8294.00
\$8428.00	\$8616.00	\$8294.00
\$11451.00	\$8616.00	\$8294.00
\$7001.00	\$8616.00	\$8294.00
\$7398.00	\$8616.00	\$8294.00
\$8616.00	\$8616.00	\$8294.00
\$7029.00	\$8616.00	\$8294.00
\$7960.00	\$8616.00	\$8294.00
\$8329.00	\$8616.00	\$8294.00
\$6099.00	\$8616.00	\$8294.00
\$8512.00	\$8616.00	\$8294.00
\$5970.00	\$8616.00	\$8294.00
\$10789.00	\$8616.00	\$8294.00
\$6128.00	\$8616.00	\$8294.00
\$11929.00	\$8616.00	\$8294.00
\$6078.00	\$8616.00	\$8294.00
\$7552.00	\$8616.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	39.89%		45.13%
	40.39%		45.13%
	34.48%		45.13%
	48.11%		45.13%
	61.92%		45.13%
	32.78%		45.13%
	33.6%		45.13%
	43.26%		45.13%
	37.89%		45.13%
	64.13%		45.13%
	43.55%		45.13%
	31.62%		45.13%
	50.23%		45.13%
	39.06%		45.13%
	61.1%		45.13%
	30.1%		45.13%
	54.52%		45.13%
	45.84%		45.13%
	34.49%		45.13%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

NORTH COLORADO MEDICAL CENTER	060001	CO
LONGMONT UNITED HOSPITAL	060003	CO
PLATTE VALLEY MEDICAL CENTER	060004	CO
MONTROSE MEMORIAL HOSPITAL	060006	CO
SAN LUIS VALLEY REGIONAL MEDICAL CENTER	060008	CO
EXEMPLA LUTHERAN MEDICAL CENTER	060009	CO
POUDRE VALLEY HOSPITAL	060010	CO
DENVER HEALTH MEDICAL CENTER	060011	CO
ST MARY CORWIN MED CTR, CENTURA HEALTH	060012	CO
MERCY REGIONAL MEDICAL CENTER	060013	CO
PRESBYTERIAN/ST LUKE'S MEDICAL CENTER	060014	CO
CENTURA HEALTH-ST ANTHONY HOSPITAL	060015	CO
CENTURA HEALTH-ST THOMAS MORE HOSPITAL	060016	CO
PARKVIEW MEDICAL CENTER INC	060020	CO
MEMORIAL HEALTH SYSTEM	060022	CO
ST MARYS HOSPITAL AND MEDICAL CENTER	060023	CO
UNIVERSITY OF COLORADO HOSPITAL ANSCHUTZ INPATIENT	060024	CO
BOULDER COMMUNITY HOSPITAL	060027	CO
EXEMPLA SAINT JOSEPH HOSPITAL	060028	CO
MCKEE MEDICAL CENTER	060030	CO
CENTURA HEALTH-PENROSE ST FRANCIS	060031	CO

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

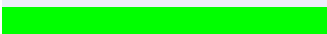
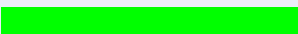


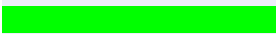
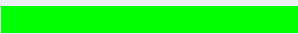














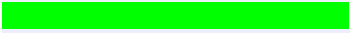
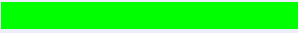














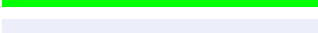
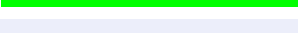
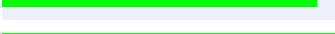
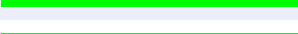
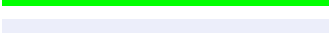
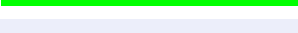
IP-Acute

Based on Spending Breakdown by Claim

	\$8256.00	\$8953.00	\$8294.00
	\$9019.00	\$8953.00	\$8294.00
	\$6797.00	\$8953.00	\$8294.00
	\$7433.00	\$8953.00	\$8294.00
	\$7271.00	\$8953.00	\$8294.00
	\$8044.00	\$8953.00	\$8294.00
	\$8691.00	\$8953.00	\$8294.00
	\$8447.00	\$8953.00	\$8294.00
	\$7564.00	\$8953.00	\$8294.00
	\$9773.00	\$8953.00	\$8294.00
	\$11024.00	\$8953.00	\$8294.00
	\$10153.00	\$8953.00	\$8294.00
	\$6809.00	\$8953.00	\$8294.00
	\$8893.00	\$8953.00	\$8294.00
	\$8780.00	\$8953.00	\$8294.00
	\$9701.00	\$8953.00	\$8294.00
	\$9667.00	\$8953.00	\$8294.00
	\$9747.00	\$8953.00	\$8294.00
	\$8534.00	\$8953.00	\$8294.00
	\$8207.00	\$8953.00	\$8294.00
	\$8598.00	\$8953.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.11%		47.94%
	50.64%		47.94%
	38.8%		47.94%
	47.43%		47.94%
	45.04%		47.94%
	43.85%		47.94%
	48.64%		47.94%
	50.98%		47.94%
	43.21%		47.94%
	54.55%		47.94%
	49.27%		47.94%
	46.77%		47.94%
	46.24%		47.94%
	48.98%		47.94%
	46.18%		47.94%
	51.98%		47.94%
	51.9%		47.94%
	52.66%		47.94%
	44.66%		47.94%
	47.18%		47.94%
	46.46%		47.94%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

HEALTH SERVICES		
ROSE MEDICAL CENTER	060032	CO
SWEDISH MEDICAL CENTER	060034	CO
ARKANSAS VALLEY REGIONAL MEDICAL CENTER	060036	CO
COLORADO PLAINS MEDICAL CENTER	060044	CO
YAMPA VALLEY MEDICAL CENTER	060049	CO
COMMUNITY HOSPITAL	060054	CO
CENTURA HEALTH-PORTER ADVENTIST HOSPITAL	060064	CO
NORTH SUBURBAN MEDICAL CENTER	060065	CO
DELTA COUNTY MEMORIAL HOSPITAL	060071	CO
VALLEY VIEW HOSPITAL ASSOCIATION	060075	CO
STERLING REGIONAL MEDCENTER	060076	CO
VAIL VALLEY MEDICAL CENTER	060096	CO
MEDICAL CENTER OF AURORA, THE	060100	CO
CENTURA HEALTH-AVISTA ADVENTIST HOSPITAL	060103	CO
ST ANTHONY NORTH HOSP, CENTURA HEALTH	060104	CO
SKY RIDGE MEDICAL CENTER	060112	CO
LITTLETON ADVENTIST HOSPITAL, CENTURA HEALTH	060113	CO
PARKER ADVENTIST HOSPITAL	060114	CO
EXEMPLA GOOD SAMARITAN MEDICAL CENTER LLC	060116	CO

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

	\$8892.00	\$8953.00	\$8294.00
	\$9286.00	\$8953.00	\$8294.00
	\$6291.00	\$8953.00	\$8294.00
	\$6339.00	\$8953.00	\$8294.00
	\$8247.00	\$8953.00	\$8294.00
	\$8365.00	\$8953.00	\$8294.00
	\$10645.00	\$8953.00	\$8294.00
	\$8144.00	\$8953.00	\$8294.00
	\$6127.00	\$8953.00	\$8294.00
	\$8488.00	\$8953.00	\$8294.00
	\$7117.00	\$8953.00	\$8294.00
	\$10465.00	\$8953.00	\$8294.00
	\$9109.00	\$8953.00	\$8294.00
	\$8881.00	\$8953.00	\$8294.00
	\$7568.00	\$8953.00	\$8294.00
	\$11547.00	\$8953.00	\$8294.00
	\$7803.00	\$8953.00	\$8294.00
	\$9991.00	\$8953.00	\$8294.00
	\$8811.00	\$8953.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	47.66%		47.94%
	44.55%		47.94%
	45.05%		47.94%
	39.64%		47.94%
	55.49%		47.94%
	51.64%		47.94%
	50.64%		47.94%
	43.03%		47.94%
	46.43%		47.94%
	50.19%		47.94%
	44.55%		47.94%
	58.55%		47.94%
	43.92%		47.94%
	49.33%		47.94%
	42.32%		47.94%
	55.02%		47.94%
	41.88%		47.94%
	51.32%		47.94%
	48.76%		47.94%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

LLC

ANIMAS SURGICAL HOSPITAL, LLC	060117	CO
ST ANTHONY SUMMIT MEDICAL CENTER	060118	CO
MEDICAL CENTER OF THE ROCKIES	060119	CO
ORTHOCOLORADO HOSPITAL AT ST ANTHONY MED CAMPUS	060124	CO
HOSPITAL OF ST RAPHAEL	070001	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
SHARON HOSPITAL	070004	CT
DAY KIMBALL HOSPITAL	070003	CT
WATERBURY HOSPITAL	070005	CT
STAMFORD HOSPITAL	070006	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
BRIDGEPORT HOSPITAL	070010	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
NEW MILFORD HOSPITAL	070015	CT
SAINT MARYS HOSPITAL	070016	CT
MIDSTATE MEDICAL CENTER	070017	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
MILFORD HOSPITAL, INC	070019	CT

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$10070.00	\$8953.00	\$8294.00
\$10235.00	\$8953.00	\$8294.00
\$10683.00	\$8953.00	\$8294.00
\$13553.00	\$8953.00	\$8294.00
\$8431.00	\$8021.00	\$8294.00
\$9169.00	\$8021.00	\$8294.00
\$6295.00	\$8021.00	\$8294.00
\$6122.00	\$8021.00	\$8294.00
\$8316.00	\$8021.00	\$8294.00
\$8238.00	\$8021.00	\$8294.00
\$7816.00	\$8021.00	\$8294.00
\$7450.00	\$8021.00	\$8294.00
\$8260.00	\$8021.00	\$8294.00
\$7301.00	\$8021.00	\$8294.00
\$7717.00	\$8021.00	\$8294.00
\$7249.00	\$8021.00	\$8294.00
\$7727.00	\$8021.00	\$8294.00
\$7392.00	\$8021.00	\$8294.00
\$7295.00	\$8021.00	\$8294.00
\$8050.00	\$8021.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	60.62%		47.94%
	56.39%		47.94%
	51.68%		47.94%
	64.19%		47.94%
	41.81%		42.77%
	45.21%		42.77%
	40.49%		42.77%
	38.72%		42.77%
	44.57%		42.77%
	40.87%		42.77%
	41.68%		42.77%
	39.52%		42.77%
	41.76%		42.77%
	42.08%		42.77%
	41.17%		42.77%
	41.44%		42.77%
	42.41%		42.77%
	39.35%		42.77%
	41.8%		42.77%
	40.63%		42.77%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

MIDDLESEX HOSPITAL	070020	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
HARTFORD HOSPITAL	070025	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
BRISTOL HOSPITAL	070029	CT
GRIFFIN HOSPITAL	070031	CT
DANBURY HOSPITAL	070033	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
JOHN DEMPSEY HOSPITAL	070036	CT
MASONICARE HEALTH CENTER	070039	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
CHRISTIANA HOSPITAL	080001	DE
ST FRANCIS HOSPITAL	080003	DE
BAYHEALTH - KENT GENERAL HOSPITAL	080004	DE
NANTICOKE MEMORIAL HOSPITAL	080006	DE
BEEBE MEDICAL CENTER	080007	DE
BAYHEALTH - MILFORD MEMORIAL HOSPITAL	080009	DE
GEORGE WASHINGTON UNIV HOSPITAL	090001	DC

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





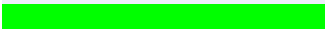
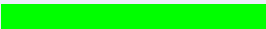
















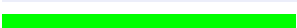
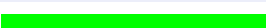
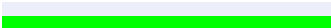
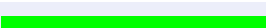
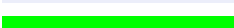
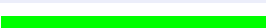
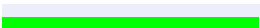
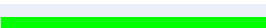
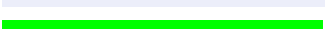
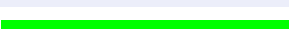
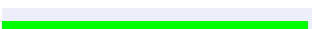
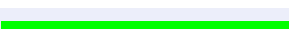
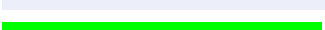
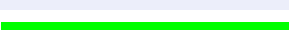
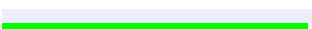
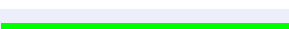
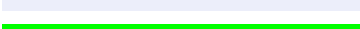
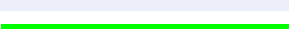


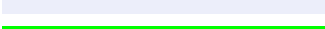
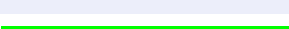
IP-Acute

Based on Spending Breakdown by Claim

\$7397.00	\$8021.00	\$8294.00
\$6933.00	\$8021.00	\$8294.00
\$8634.00	\$8021.00	\$8294.00
\$7620.00	\$8021.00	\$8294.00
\$9729.00	\$8021.00	\$8294.00
\$7410.00	\$8021.00	\$8294.00
\$7862.00	\$8021.00	\$8294.00
\$6954.00	\$8021.00	\$8294.00
\$6907.00	\$8021.00	\$8294.00
\$7659.00	\$8021.00	\$8294.00
\$7290.00	\$8021.00	\$8294.00
\$7032.00	\$8021.00	\$8294.00
\$8610.00	\$8021.00	\$8294.00
\$5221.00	\$8021.00	\$8294.00
\$6414.00	\$8021.00	\$8294.00
\$8623.00	\$8850.00	\$8294.00
\$6905.00	\$8850.00	\$8294.00
\$8853.00	\$8850.00	\$8294.00
\$7581.00	\$8850.00	\$8294.00
\$9649.00	\$8850.00	\$8294.00
\$7420.00	\$8850.00	\$8294.00
\$8350.00	\$8850.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	41.72%		42.77%
	41.12%		42.77%
	45.87%		42.77%
	43.01%		42.77%
	46.63%		42.77%
	39.41%		42.77%
	41.53%		42.77%
	38.11%		42.77%
	38.58%		42.77%
	41.64%		42.77%
	41.79%		42.77%
	41.65%		42.77%
	46.82%		42.77%
	32.94%		42.77%
	36.47%		42.77%
	45.54%		46.61%
	43.45%		46.61%
	45.37%		46.61%
	43.41%		46.61%
	50.97%		46.61%
	44.84%		46.61%
	45.97%		46.61%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

HOWARD UNIVERSITY HOSPITAL	090003	DC
MEDSTAR GEORGETOWN UNIVERSITY HOSPITAL	090004	DC
SIBLEY MEMORIAL HOSPITAL	090005	DC
PROVIDENCE HOSPITAL	090006	DC
UNITED MEDICAL CENTER	090008	DC
MEDSTAR WASHINGTON HOSPITAL CENTER	090011	DC
SHANDS JACKSONVILLE	100001	FL
BETHESDA MEMORIAL HOSPITAL	100002	FL
ORLANDO REGIONAL MEDICAL CENTER	100006	FL
FLORIDA HOSPITAL	100007	FL
BAPTIST HOSPITAL OF MIAMI INC	100008	FL
UNIVERSITY OF MIAMI HOSPITAL	100009	FL
LEE MEMORIAL HOSPITAL	100012	FL
BERT FISH MEDICAL CENTER	100014	FL
HALIFAX HEALTH MEDICAL CENTER	100017	FL
NAPLES COMMUNITY HOSPITAL	100018	FL
HOLMES REGIONAL MEDICAL CENTER	100019	FL
JACKSON HEALTH SYSTEM	100022	FL
CITRUS MEMORIAL HOSPITAL	100023	FL
SACRED HEART HOSPITAL	100025	FL
BAY MEDICAL CENTER SACRED HEART HEALTH	100026	FL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$6560.00	\$8850.00	\$8294.00
\$11228.00	\$8850.00	\$8294.00
\$8267.00	\$8850.00	\$8294.00
\$7594.00	\$8850.00	\$8294.00
\$7060.00	\$8850.00	\$8294.00
\$10628.00	\$8850.00	\$8294.00
\$7555.00	\$8223.00	\$8294.00
\$7960.00	\$8223.00	\$8294.00
\$8976.00	\$8223.00	\$8294.00
\$8524.00	\$8223.00	\$8294.00
\$8464.00	\$8223.00	\$8294.00
\$9097.00	\$8223.00	\$8294.00
\$8475.00	\$8223.00	\$8294.00
\$7774.00	\$8223.00	\$8294.00
\$8654.00	\$8223.00	\$8294.00
\$8380.00	\$8223.00	\$8294.00
\$9267.00	\$8223.00	\$8294.00
\$9406.00	\$8223.00	\$8294.00
\$9092.00	\$8223.00	\$8294.00
\$9570.00	\$8223.00	\$8294.00
\$8572.00	\$8223.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	48.79%		46.61%
	48.1%		46.61%
	48.08%		46.61%
	41.17%		46.61%
	39.62%		46.61%
	49.99%		46.61%
	43.3%		42.4%
	39.37%		42.4%
	44.66%		42.4%
	44.36%		42.4%
	42.47%		42.4%
	42.32%		42.4%
	46.31%		42.4%
	42.83%		42.4%
	42.96%		42.4%
	43.52%		42.4%
	42.85%		42.4%
	45.93%		42.4%
	45.09%		42.4%
	47.71%		42.4%
	44.77%		42.4%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

SYSTEM

PARRISH MEDICAL CENTER	100028	FL
NORTH SHORE MEDICAL CENTER	100029	FL
HEALTH CENTRAL	100030	FL
BAYFRONT MEDICAL CENTER INC	100032	FL
MOUNT SINAI MEDICAL CENTER	100034	FL
MANATEE MEMORIAL HOSPITAL	100035	FL
MEMORIAL REGIONAL HOSPITAL	100038	FL
BROWARD HEALTH MEDICAL CENTER	100039	FL
ST VINCENT'S MEDICAL CENTER	100040	FL
MEASE HOSPITAL DUNEDIN	100043	FL
MARTIN MEMORIAL MEDICAL CENTER	100044	FL
FLORIDA HOSPITAL DELAND	100045	FL
FLORIDA HOSPITAL ZEPHYRHILLS	100046	FL
CHARLOTTE REGIONAL MEDICAL CENTER	100047	FL
JAY HOSPITAL	100048	FL
HIGHLANDS REGIONAL MEDICAL CENTER	100049	FL
PALM SPRINGS GENERAL HOSPITAL	100050	FL
SOUTH LAKE HOSPITAL	100051	FL
WINTER HAVEN HOSPITAL	100052	FL
HIALEAH HOSPITAL	100053	FL
TWIN CITIES HOSPITAL	100054	FL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$8457.00	\$8223.00	\$8294.00
\$6802.00	\$8223.00	\$8294.00
\$7123.00	\$8223.00	\$8294.00
\$8759.00	\$8223.00	\$8294.00
\$9600.00	\$8223.00	\$8294.00
\$8656.00	\$8223.00	\$8294.00
\$8335.00	\$8223.00	\$8294.00
\$10330.00	\$8223.00	\$8294.00
\$8732.00	\$8223.00	\$8294.00
\$7600.00	\$8223.00	\$8294.00
\$8596.00	\$8223.00	\$8294.00
\$7202.00	\$8223.00	\$8294.00
\$7915.00	\$8223.00	\$8294.00
\$8546.00	\$8223.00	\$8294.00
\$5198.00	\$8223.00	\$8294.00
\$7142.00	\$8223.00	\$8294.00
\$6591.00	\$8223.00	\$8294.00
\$7678.00	\$8223.00	\$8294.00
\$7475.00	\$8223.00	\$8294.00
\$6985.00	\$8223.00	\$8294.00
\$7314.00	\$8223.00	\$8294.00

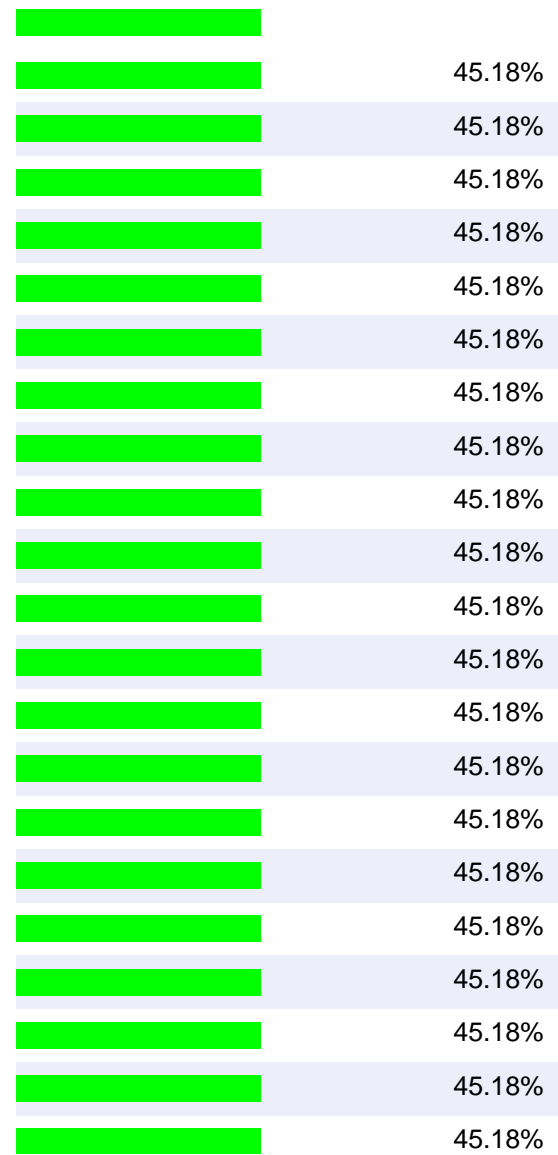
IP-Acute

Based on Spending Breakdown by Claim

	43.69%		42.4%
	33.79%		42.4%
	39.32%		42.4%
	38.33%		42.4%
	41.37%		42.4%
	42.48%		42.4%
	41.71%		42.4%
	46.11%		42.4%
	44.35%		42.4%
	36.72%		42.4%
	44.21%		42.4%
	41.44%		42.4%
	45.22%		42.4%
	46.58%		42.4%
	41.72%		42.4%
	40.6%		42.4%
	33.25%		42.4%
	42.14%		42.4%
	39.56%		42.4%
	36.54%		42.4%
	46.84%		42.4%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

FLORIDA HOSPITAL NORTH PINELLAS	100055	FL
FLORIDA HOSPITAL WATERMAN	100057	FL
MUNROE REGIONAL MEDICAL CENTER	100062	FL
MORTON PLANT NORTH BAY HOSPITAL	100063	FL
ST ANTHONY'S HOSPITAL	100067	FL
FLORIDA HOSPITAL MEMORIAL MEDICAL CENTER	100068	FL
FLORIDA HOSPITAL CARROLLWOOD	100069	FL
VENICE REGIONAL MEDICAL CENTER	100070	FL
BROOKSVILLE REGIONAL HOSPITAL	100071	FL
FLORIDA HOSPITAL FISH MEMORIAL	100072	FL
HOLY CROSS HOSPITAL INC	100073	FL
ST JOSEPH'S HOSPITAL	100075	FL
METROPOLITAN HOSPITAL OF MIAMI	100076	FL
PEACE RIVER REGIONAL MEDICAL CENTER	100077	FL
JFK MEDICAL CENTER	100080	FL
HEALTHMARK REGIONAL MEDICAL CENTER	100081	FL
LEESBURG REGIONAL MEDICAL CENTER	100084	FL
BROWARD HEALTH NORTH	100086	FL
SARASOTA MEMORIAL HOSPITAL	100087	FL
BAPTIST MEDICAL CENTER	100088	FL
FLAGLER HOSPITAL	100090	FL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$8058.00	\$8223.00	\$8294.00
\$7578.00	\$8223.00	\$8294.00
\$9311.00	\$8223.00	\$8294.00
\$6723.00	\$8223.00	\$8294.00
\$7621.00	\$8223.00	\$8294.00
\$8872.00	\$8223.00	\$8294.00
\$10562.00	\$8223.00	\$8294.00
\$8701.00	\$8223.00	\$8294.00
\$7171.00	\$8223.00	\$8294.00
\$7443.00	\$8223.00	\$8294.00
\$9013.00	\$8223.00	\$8294.00
\$8052.00	\$8223.00	\$8294.00
\$5753.00	\$8223.00	\$8294.00
\$8195.00	\$8223.00	\$8294.00
\$8107.00	\$8223.00	\$8294.00
\$5472.00	\$8223.00	\$8294.00
\$9041.00	\$8223.00	\$8294.00
\$7994.00	\$8223.00	\$8294.00
\$9364.00	\$8223.00	\$8294.00
\$8563.00	\$8223.00	\$8294.00
\$8175.00	\$8223.00	\$8294.00

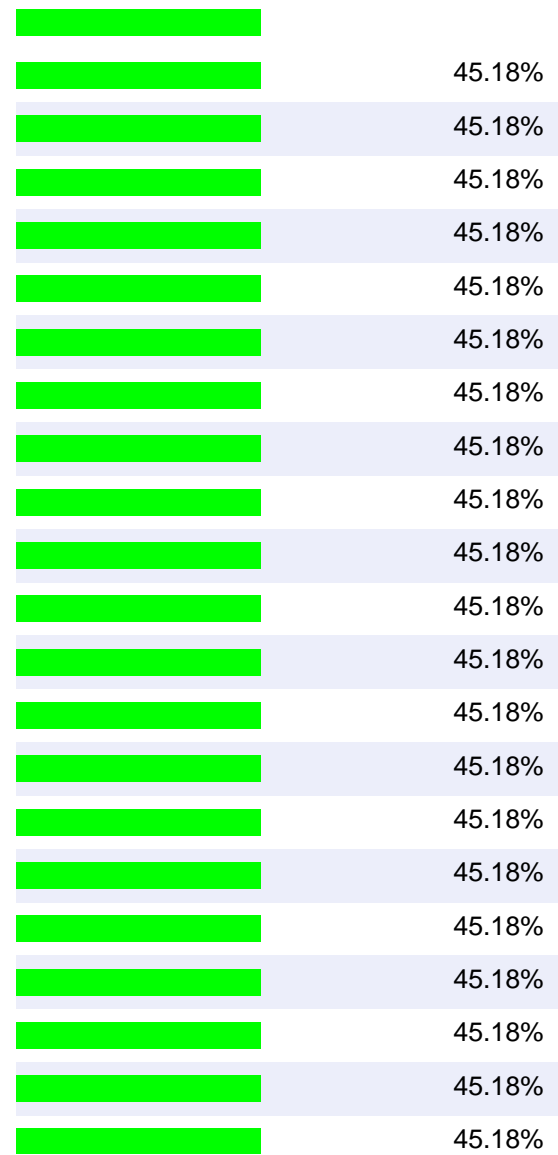
IP-Acute

Based on Spending Breakdown by Claim

	39.12%		42.4%
	42.91%		42.4%
	46.85%		42.4%
	37.45%		42.4%
	39.84%		42.4%
	45.28%		42.4%
	48.07%		42.4%
	43.58%		42.4%
	40.96%		42.4%
	40.84%		42.4%
	42.76%		42.4%
	41.06%		42.4%
	35.08%		42.4%
	42.16%		42.4%
	41.71%		42.4%
	38.84%		42.4%
	44.79%		42.4%
	38.51%		42.4%
	43.44%		42.4%
	41.27%		42.4%
	44.08%		42.4%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

WUESTHOFF MEDICAL CENTER ROCKLEDGE	100092	FL
BAPTIST HOSPITAL PENSACOLA	100093	FL
LAKE WALES MEDICAL CENTER	100099	FL
SHANDS LAKE SHORE REGIONAL MEDICAL CENTER	100102	FL
INDIAN RIVER MEMORIAL HOSPITAL INC	100105	FL
DOCTOR'S MEMORIAL HOSPITAL INC	100106	FL
LEHIGH REGIONAL MEDICAL CENTER	100107	FL
FLORIDA HOSPITAL HEARTLAND MEDICAL CENTER	100109	FL
OSCEOLA REGIONAL MEDICAL CENTER	100110	FL
SHANDS HOSPITAL AT THE UNIVERSITY OF FLORIDA	100113	FL
BAPTIST MEDICAL CENTER BEACHES	100117	FL
FLORIDA HOSPITAL FLAGLER	100118	FL
BARTOW REGIONAL MEDICAL CENTER	100121	FL
NORTH OKALOOSA MEDICAL CENTER	100122	FL
SANTA ROSA MEDICAL CENTER	100124	FL
HOMESTEAD HOSPITAL	100125	FL
PALMS OF PASADENA HOSPITAL	100126	FL
MORTON PLANT HOSPITAL	100127	FL
TAMPA GENERAL HOSPITAL	100128	FL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7438.00	\$8223.00	\$8294.00
\$9350.00	\$8223.00	\$8294.00
\$6231.00	\$8223.00	\$8294.00
\$5780.00	\$8223.00	\$8294.00
\$8853.00	\$8223.00	\$8294.00
\$5806.00	\$8223.00	\$8294.00
\$7415.00	\$8223.00	\$8294.00
\$7496.00	\$8223.00	\$8294.00
\$8014.00	\$8223.00	\$8294.00
\$10317.00	\$8223.00	\$8294.00
\$6579.00	\$8223.00	\$8294.00
\$7571.00	\$8223.00	\$8294.00
\$7447.00	\$8223.00	\$8294.00
\$6473.00	\$8223.00	\$8294.00
\$6347.00	\$8223.00	\$8294.00
\$6501.00	\$8223.00	\$8294.00
\$7716.00	\$8223.00	\$8294.00
\$9045.00	\$8223.00	\$8294.00
\$10895.00	\$8223.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.04%		42.4%
	47.94%		42.4%
	42.41%		42.4%
	40.39%		42.4%
	43.91%		42.4%
	40.99%		42.4%
	41.28%		42.4%
	41.6%		42.4%
	42.57%		42.4%
	48.41%		42.4%
	35.02%		42.4%
	42.49%		42.4%
	43.86%		42.4%
	42.16%		42.4%
	42.24%		42.4%
	37.79%		42.4%
	36.88%		42.4%
	42.64%		42.4%
	47.78%		42.4%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

LAKESIDE MEDICAL CENTER	100130	FL
AVENTURA HOSPITAL AND MEDICAL CENTER	100131	FL
SOUTH FLORIDA BAPTIST HOSPITAL	100132	FL
TALLAHASSEE MEMORIAL HEALTHCARE	100135	FL
HEART OF FLORIDA REGIONAL MEDICAL CENTER	100137	FL
TRI COUNTY HOSPITAL - WILLISTON	100139	FL
BAPTIST MEDICAL CENTER NASSAU	100140	FL
FLORIDA HOSPITAL TAMPA	100173	FL
JACKSON HOSPITAL	100142	FL
LOWER KEYS MEDICAL CENTER	100150	FL
MAYO CLINIC FLORIDA	100151	FL
SOUTH MIAMI HOSPITAL	100154	FL
LAKE CITY MEDICAL CENTER	100156	FL
LAKELAND REGIONAL MEDICAL CENTER	100157	FL
CENTRAL FLORIDA REGIONAL HOSPITAL	100161	FL
DOCTORS HOSPITAL OF SARASOTA	100166	FL
PLANTATION GENERAL HOSPITAL	100167	FL
BOCA RATON REGIONAL HOSPITAL	100168	FL
DESOTO MEMORIAL HOSPITAL	100175	FL
PALM BEACH GARDENS MEDICAL CENTER	100176	FL
CAPE CANAVERAL HOSPITAL	100177	FL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$6291.00	\$8223.00	\$8294.00
\$7026.00	\$8223.00	\$8294.00
\$7034.00	\$8223.00	\$8294.00
\$8943.00	\$8223.00	\$8294.00
\$7715.00	\$8223.00	\$8294.00
\$5004.00	\$8223.00	\$8294.00
\$6345.00	\$8223.00	\$8294.00
\$8586.00	\$8223.00	\$8294.00
\$6296.00	\$8223.00	\$8294.00
\$6204.00	\$8223.00	\$8294.00
\$10449.00	\$8223.00	\$8294.00
\$8277.00	\$8223.00	\$8294.00
\$5934.00	\$8223.00	\$8294.00
\$8323.00	\$8223.00	\$8294.00
\$8485.00	\$8223.00	\$8294.00
\$9264.00	\$8223.00	\$8294.00
\$7388.00	\$8223.00	\$8294.00
\$8913.00	\$8223.00	\$8294.00
\$5572.00	\$8223.00	\$8294.00
\$9194.00	\$8223.00	\$8294.00
\$7405.00	\$8223.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.7%		42.4%
	35.85%		42.4%
	39.5%		42.4%
	45.01%		42.4%
	43.48%		42.4%
	44.74%		42.4%
	47.44%		42.4%
	40.44%		42.4%
	38.68%		42.4%
	47.68%		42.4%
	50.41%		42.4%
	44.99%		42.4%
	38.89%		42.4%
	43.61%		42.4%
	45.87%		42.4%
	41.81%		42.4%
	41.44%		42.4%
	41.82%		42.4%
	37.99%		42.4%
	43.55%		42.4%
	40.5%		42.4%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

MEMORIAL HOSPITAL JACKSONVILLE	100179	FL
ST PETERSBURG GENERAL HOSPITAL	100180	FL
LARKIN COMMUNITY HOSPITAL	100181	FL
CORAL GABLES HOSPITAL	100183	FL
PALMETTO GENERAL HOSPITAL	100187	FL
NORTHWEST MEDICAL CENTER	100189	FL
MEDICAL CENTER OF TRINITY	100191	FL
BROWARD HEALTH IMPERIAL POINT	100200	FL
NORTH FLORIDA REGIONAL MEDICAL CENTER	100204	FL
MEMORIAL HOSPITAL OF TAMPA	100206	FL
KENDALL REGIONAL MEDICAL CENTER	100209	FL
PASCO REGIONAL MEDICAL CENTER	100211	FL
OCALA REGIONAL MEDICAL CENTER	100212	FL
BLAKE MEDICAL CENTER	100213	FL
SEBASTIAN RIVER MEDICAL CENTER	100217	FL
GULF COAST MEDICAL CENTER LEE MEM HEALTH SYSTEM	100220	FL
FORT WALTON BEACH MEDICAL CENTER	100223	FL
UNIVERSITY HOSPITAL AND MEDICAL CENTER	100224	FL
ORANGE PARK MEDICAL CENTER	100226	FL
WESTSIDE REGIONAL MEDICAL CENTER	100228	FL

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$8263.00	\$8223.00	\$8294.00
\$7634.00	\$8223.00	\$8294.00
\$6813.00	\$8223.00	\$8294.00
\$6479.00	\$8223.00	\$8294.00
\$7257.00	\$8223.00	\$8294.00
\$7255.00	\$8223.00	\$8294.00
\$7753.00	\$8223.00	\$8294.00
\$7584.00	\$8223.00	\$8294.00
\$8403.00	\$8223.00	\$8294.00
\$6845.00	\$8223.00	\$8294.00
\$7796.00	\$8223.00	\$8294.00
\$6996.00	\$8223.00	\$8294.00
\$8636.00	\$8223.00	\$8294.00
\$7985.00	\$8223.00	\$8294.00
\$7167.00	\$8223.00	\$8294.00
\$8586.00	\$8223.00	\$8294.00
\$8107.00	\$8223.00	\$8294.00
\$6950.00	\$8223.00	\$8294.00
\$7182.00	\$8223.00	\$8294.00
\$7633.00	\$8223.00	\$8294.00

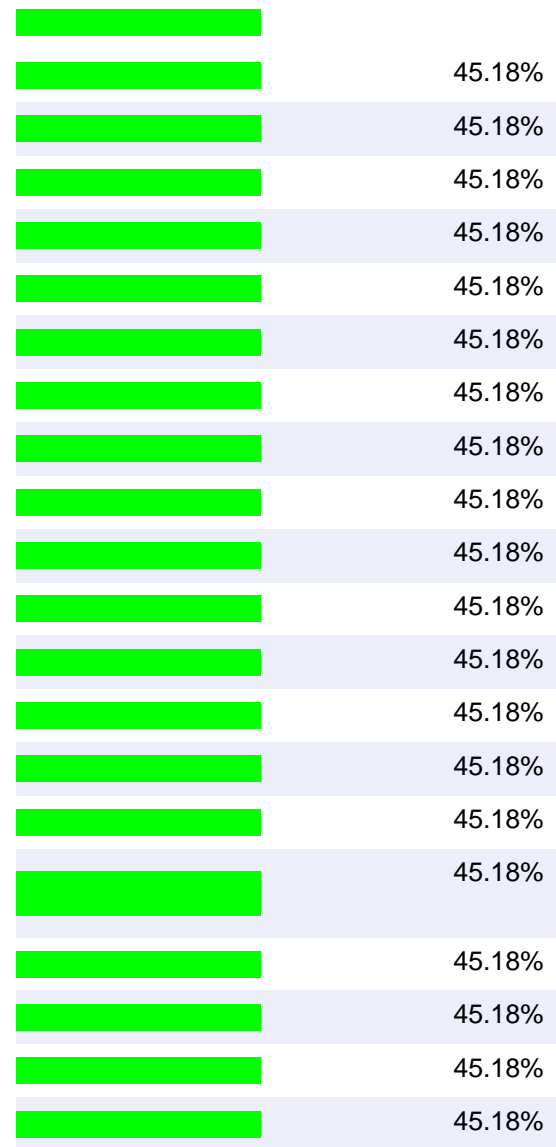
IP-Acute

Based on Spending Breakdown by Claim

	39.01%		42.4%
	36.79%		42.4%
	34.99%		42.4%
	35.8%		42.4%
	37.99%		42.4%
	36.48%		42.4%
	37.81%		42.4%
	38.24%		42.4%
	46.04%		42.4%
	39.79%		42.4%
	41.46%		42.4%
	41.77%		42.4%
	44.77%		42.4%
	39.81%		42.4%
	42.38%		42.4%
	44.85%		42.4%
	44.48%		42.4%
	32.83%		42.4%
	37.69%		42.4%
	38.36%		42.4%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

MEMORIAL HOSPITAL PEMBROKE	100230	FL
WEST FLORIDA HOSPITAL	100231	FL
PUTNAM COMMUNITY MEDICAL CENTER	100232	FL
COLUMBIA HOSPITAL	100234	FL
FAWCETT MEMORIAL HOSPITAL	100236	FL
NORTHSIDE HOSPITAL	100238	FL
EDWARD WHITE HOSPITAL	100239	FL
GULF COAST MEDICAL CENTER	100242	FL
BRANDON REGIONAL HOSPITAL	100243	FL
CAPE CORAL HOSPITAL	100244	FL
LAWNWOOD REGIONAL MEDICAL CENTER & HEART INSTITUTE	100246	FL
LARGO MEDICAL CENTER	100248	FL
SEVEN RIVERS REGIONAL MEDICAL CENTER	100249	FL
RAULERSON HOSPITAL	100252	FL
JUPITER MEDICAL CENTER	100253	FL
CAPITAL REGIONAL MEDICAL CENTER	100254	FL
TOWN & COUNTRY HOSPITAL	100255	FL
REGIONAL MEDICAL CENTER BAYONET POINT	100256	FL
DELRAY MEDICAL CENTER	100258	FL
SOUTH BAY HOSPITAL	100259	FL
ST LUCIE MEDICAL CENTER	100260	FL

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





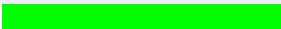
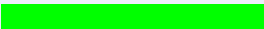
































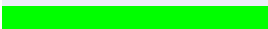
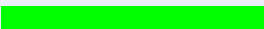


IP-Acute

Based on Spending Breakdown by Claim

\$6791.00	\$8223.00	\$8294.00
\$8677.00	\$8223.00	\$8294.00
\$6510.00	\$8223.00	\$8294.00
\$7354.00	\$8223.00	\$8294.00
\$8170.00	\$8223.00	\$8294.00
\$8160.00	\$8223.00	\$8294.00
\$8342.00	\$8223.00	\$8294.00
\$8255.00	\$8223.00	\$8294.00
\$8125.00	\$8223.00	\$8294.00
\$7576.00	\$8223.00	\$8294.00
\$8067.00	\$8223.00	\$8294.00
\$8258.00	\$8223.00	\$8294.00
\$7868.00	\$8223.00	\$8294.00
\$7419.00	\$8223.00	\$8294.00
\$8076.00	\$8223.00	\$8294.00
\$7035.00	\$8223.00	\$8294.00
\$6640.00	\$8223.00	\$8294.00
\$7873.00	\$8223.00	\$8294.00
\$8162.00	\$8223.00	\$8294.00
\$6895.00	\$8223.00	\$8294.00
\$7847.00	\$8223.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.77%		42.4%
	45.71%		42.4%
	39.71%		42.4%
	33.37%		42.4%
	41.93%		42.4%
	40.33%		42.4%
	38.86%		42.4%
	41.62%		42.4%
	43.68%		42.4%
	43.06%		42.4%
	40.93%		42.4%
	38.52%		42.4%
	42.55%		42.4%
	38.87%		42.4%
	43.2%		42.4%
	38.89%		42.4%
	38.75%		42.4%
	42.36%		42.4%
	38.13%		42.4%
	37.77%		42.4%
	40.04%		42.4%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

OAK HILL HOSPITAL	100264	FL
MORTON PLANT MEASE HEALTHCARE COUNTRYSIDE	100265	FL
GULF BREEZE HOSPITAL	100266	FL
ENGLEWOOD COMMUNITY HOSPITAL	100267	FL
WEST BOCA MEDICAL CENTER	100268	FL
PALMS WEST HOSPITAL	100269	FL
WELLINGTON REGIONAL MEDICAL CENTER	100275	FL
BROWARD HEALTH CORAL SPRINGS	100276	FL
DOUGLAS GARDENS HOSPITAL	100277	FL
MEMORIAL HOSPITAL WEST	100281	FL
WESTCHESTER GENERAL HOSPITAL	100284	FL
MEMORIAL HOSPITAL MIRAMAR	100285	FL
PHYSICIANS REGIONAL MEDICAL CENTER - PINE RIDGE	100286	FL
GOOD SAMARITAN MEDICAL CENTER	100287	FL
ST MARY'S MEDICAL CENTER	100288	FL
CLEVELAND CLINIC HOSPITAL	100289	FL
VILLAGES REGIONAL HOSPITAL, THE	100290	FL
WUESTHOFF MELBOURNE	100291	FL
SACRED HEART HOSPITAL ON THE EMERALD COAST	100292	FL
DOCTORS HOSPITAL	100296	FL

IP-Acute

Based on Spending Breakdown by Claim

[illegible]




































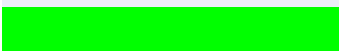
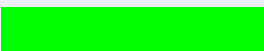


IP-Acute

Based on Spending Breakdown by Claim

\$8240.00	\$8223.00	\$8294.00
\$7517.00	\$8223.00	\$8294.00
\$7917.00	\$8223.00	\$8294.00
\$6804.00	\$8223.00	\$8294.00
\$6546.00	\$8223.00	\$8294.00
\$7386.00	\$8223.00	\$8294.00
\$7007.00	\$8223.00	\$8294.00
\$7085.00	\$8223.00	\$8294.00
\$5556.00	\$8223.00	\$8294.00
\$7475.00	\$8223.00	\$8294.00
\$5725.00	\$8223.00	\$8294.00
\$6465.00	\$8223.00	\$8294.00
\$9188.00	\$8223.00	\$8294.00
\$7839.00	\$8223.00	\$8294.00
\$8349.00	\$8223.00	\$8294.00
\$8759.00	\$8223.00	\$8294.00
\$7437.00	\$8223.00	\$8294.00
\$7782.00	\$8223.00	\$8294.00
\$9670.00	\$8223.00	\$8294.00
\$7296.00	\$8223.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.56%		42.4%
	37.81%		42.4%
	46.39%		42.4%
	40.5%		42.4%
	33.54%		42.4%
	38.85%		42.4%
	37.72%		42.4%
	37.59%		42.4%
	26.8%		42.4%
	41.37%		42.4%
	33.16%		42.4%
	44.14%		42.4%
	47.81%		42.4%
	40.16%		42.4%
	39.66%		42.4%
	46.81%		42.4%
	43.45%		42.4%
	43.58%		42.4%
	47.84%		42.4%
	40.48%		42.4%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

LAKWOOD RANCH MEDICAL CENTER	100299	FL
ST CLOUD REGIONAL MEDICAL CENTER	100302	FL
ST VINCENT'S MEDICAL CENTER SOUTHSIDE	100307	FL
SACRED HEART HOSPITAL ON THE GULF	100313	FL
WEST KENDALL BAPTIST HOSPITAL	100314	FL
VIERA HOSPITAL	100315	FL
PALM BAY HOSPITAL	100316	FL
HAMILTON MEDICAL CENTER	110001	GA
UPSON REGIONAL MEDICAL CENTER	110002	GA
MAYO CLINIC HEALTH SYSTEM IN WAYCROSS	110003	GA
ERLANGER AT HUTCHESON	110004	GA
NORTHSIDE HOSPITAL FORSYTH	110005	GA
ST MARY'S HOSPITAL OF ATHENS	110006	GA
PHOEBE PUTNEY MEMORIAL HOSPITAL	110007	GA
NORTHSIDE HOSPITAL CHEROKEE	110008	GA
EMORY UNIVERSITY HOSPITAL	110010	GA
TANNER MEDICAL CENTER - CARROLLTON	110011	GA
TANNER MEDICAL CENTER VILLA RICA	110015	GA
WEST GEORGIA MEDICAL CENTER, INC	110016	GA
NEWTON MEDICAL CENTER	110018	GA
GORDON HOSPITAL	110023	GA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7313.00	\$8223.00	\$8294.00
\$6419.00	\$8223.00	\$8294.00
\$8851.00	\$8223.00	\$8294.00
\$5016.00	\$8223.00	\$8294.00
\$6857.00	\$8223.00	\$8294.00
\$6802.00	\$8223.00	\$8294.00
\$6955.00	\$8223.00	\$8294.00
\$8337.00	\$8442.00	\$8294.00
\$7231.00	\$8442.00	\$8294.00
\$6721.00	\$8442.00	\$8294.00
\$6812.00	\$8442.00	\$8294.00
\$8133.00	\$8442.00	\$8294.00
\$8620.00	\$8442.00	\$8294.00
\$9131.00	\$8442.00	\$8294.00
\$8386.00	\$8442.00	\$8294.00
\$12463.00	\$8442.00	\$8294.00
\$8454.00	\$8442.00	\$8294.00
\$6965.00	\$8442.00	\$8294.00
\$7228.00	\$8442.00	\$8294.00
\$7025.00	\$8442.00	\$8294.00
\$7535.00	\$8442.00	\$8294.00

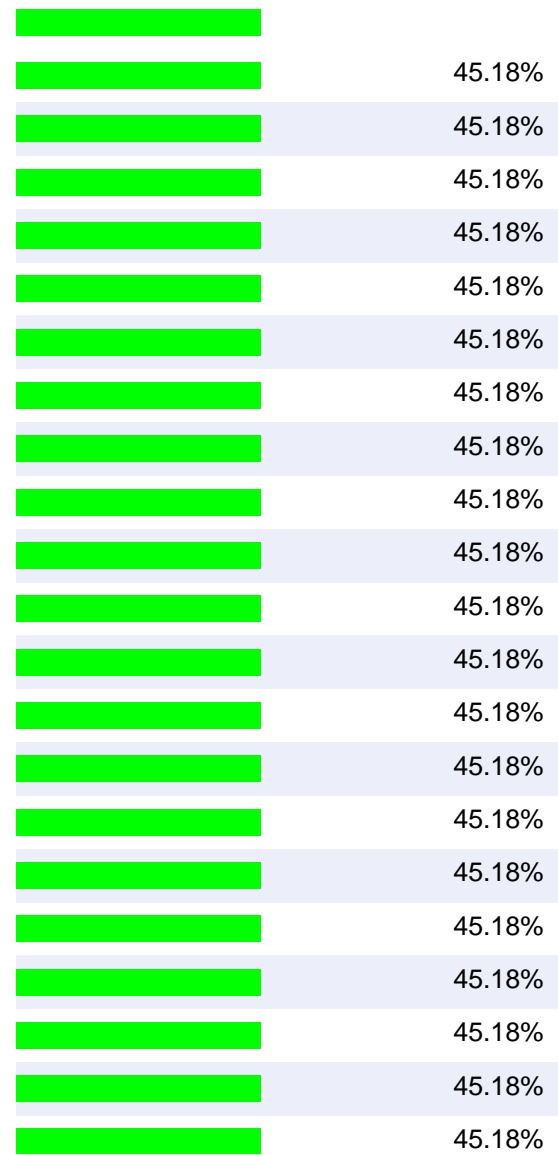
IP-Acute

Based on Spending Breakdown by Claim

	40.55%		42.4%
	35.64%		42.4%
	42.94%		42.4%
	36.42%		42.4%
	41.97%		42.4%
	41.42%		42.4%
	35.68%		42.4%
	47.08%		47.35%
	44.28%		47.35%
	43.1%		47.35%
	45.16%		47.35%
	44.42%		47.35%
	50.05%		47.35%
	49%		47.35%
	42.61%		47.35%
	56.23%		47.35%
	48.07%		47.35%
	47.17%		47.35%
	45.68%		47.35%
	41.3%		47.35%
	46.45%		47.35%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

CANDLER HOSPITAL	110024	GA
SOUTHEAST GEORGIA HEALTH SYSTEM - BRUNSWICK CAMPUS	110025	GA
ELBERT MEMORIAL HOSPITAL	110026	GA
TY COBB REGIONAL MEDICAL CENTER	110027	GA
UNIVERSITY HOSPITAL	110028	GA
NORTHEAST GEORGIA MEDICAL CENTER, INC	110029	GA
CARTERSVILLE MEDICAL CENTER	110030	GA
SPALDING REGIONAL MEDICAL CENTER	110031	GA
STEPHENS COUNTY HOSPITAL	110032	GA
GEORGIA HEALTH SCIENCES MEDICAL CENTER	110034	GA
WELLSTAR KENNESTONE HOSPITAL	110035	GA
MEMORIAL HEALTH UNIVERSITY MEDICAL CENTER	110036	GA
JOHN D ARCHBOLD MEMORIAL HOSPITAL	110038	GA
TRINITY HOSPITAL OF AUGUSTA	110039	GA
NORTHRIDGE MEDICAL CENTER	110040	GA
HABERSHAM COUNTY MEDICAL CTR	110041	GA
WELLSTAR PAULDING HOSPITAL	110042	GA
ST JOSEPH'S HOSPITAL - SAVANNAH	110043	GA
PHOEBE SUMTER MEDICAL CENTER	110044	GA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$7817.00	\$8442.00	\$8294.00
\$7884.00	\$8442.00	\$8294.00
\$6190.00	\$8442.00	\$8294.00
\$6325.00	\$8442.00	\$8294.00
\$9546.00	\$8442.00	\$8294.00
\$9576.00	\$8442.00	\$8294.00
\$7826.00	\$8442.00	\$8294.00
\$6699.00	\$8442.00	\$8294.00
\$6142.00	\$8442.00	\$8294.00
\$9075.00	\$8442.00	\$8294.00
\$8915.00	\$8442.00	\$8294.00
\$9222.00	\$8442.00	\$8294.00
\$8691.00	\$8442.00	\$8294.00
\$7506.00	\$8442.00	\$8294.00
\$6057.00	\$8442.00	\$8294.00
\$7015.00	\$8442.00	\$8294.00
\$5816.00	\$8442.00	\$8294.00
\$9918.00	\$8442.00	\$8294.00
\$6951.00	\$8442.00	\$8294.00

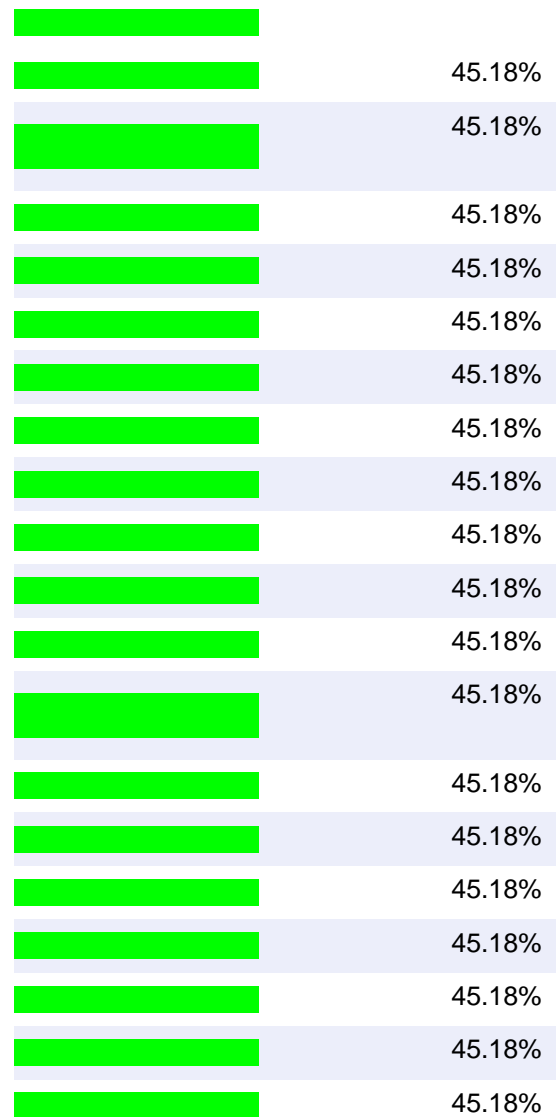
IP-Acute

Based on Spending Breakdown by Claim

	41.57%		47.35%
	47.01%		47.35%
	43.39%		47.35%
	45.13%		47.35%
	48.24%		47.35%
	52.68%		47.35%
	47.79%		47.35%
	41.84%		47.35%
	41.54%		47.35%
	48.08%		47.35%
	47.47%		47.35%
	48.55%		47.35%
	45.56%		47.35%
	47.23%		47.35%
	46.41%		47.35%
	45.62%		47.35%
	48.31%		47.35%
	51.03%		47.35%
	45.3%		47.35%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

BARROW REGIONAL MEDICAL CENTER	110045	GA
CLEARVIEW REGIONAL MEDICAL CENTER	110046	GA
MURRAY MEDICAL CENTER	110050	GA
UNION GENERAL HOSPITAL	110051	GA
FLOYD MEDICAL CENTER	110054	GA
MEDICAL CENTER, THE	110064	GA
HOUSTON MEDICAL CENTER	110069	GA
APPLING HOSPITAL	110071	GA
PHOEBE DORMINY MEDICAL CENTER	110073	GA
ATHENS REGIONAL MEDICAL CENTER	110074	GA
EAST GEORGIA REGIONAL MEDICAL CENTER	110075	GA
DEKALB MEDICAL CENTER	110076	GA
EMORY UNIVERSITY HOSPITAL MIDTOWN	110078	GA
GRADY MEMORIAL HOSPITAL	110079	GA
SAINT JOSEPHS HOSPITAL OF ATLANTA, INC.	110082	GA
PIEDMONT HOSPITAL	110083	GA
WASHINGTON COUNTY REGIONAL MEDICAL CENTER	110086	GA
GWINNETT MEDICAL CENTER	110087	GA
COFFEE REGIONAL MEDICAL CENTER	110089	GA
ROCKDALE MEDICAL CENTER	110091	GA
DODGE COUNTY HOSPITAL	110092	GA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





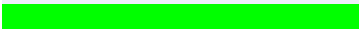
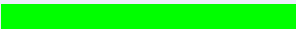
















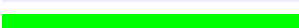
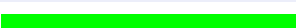
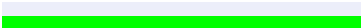
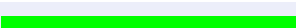
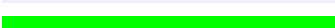
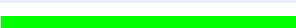
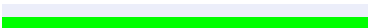
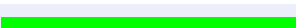
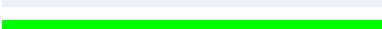
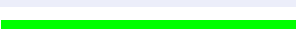






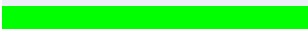
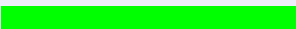


IP-Acute

Based on Spending Breakdown by Claim

	\$5681.00	\$8442.00	\$8294.00
	\$6439.00	\$8442.00	\$8294.00
	\$6773.00	\$8442.00	\$8294.00
	\$6271.00	\$8442.00	\$8294.00
	\$8085.00	\$8442.00	\$8294.00
	\$8280.00	\$8442.00	\$8294.00
	\$7118.00	\$8442.00	\$8294.00
	\$5556.00	\$8442.00	\$8294.00
	\$5924.00	\$8442.00	\$8294.00
	\$8946.00	\$8442.00	\$8294.00
	\$7192.00	\$8442.00	\$8294.00
	\$8075.00	\$8442.00	\$8294.00
	\$10644.00	\$8442.00	\$8294.00
	\$7340.00	\$8442.00	\$8294.00
	\$10253.00	\$8442.00	\$8294.00
	\$11064.00	\$8442.00	\$8294.00
	\$5765.00	\$8442.00	\$8294.00
	\$8523.00	\$8442.00	\$8294.00
	\$5914.00	\$8442.00	\$8294.00
	\$7221.00	\$8442.00	\$8294.00
	\$6024.00	\$8442.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	47.52%		47.35%
	43.79%		47.35%
	50.73%		47.35%
	49.76%		47.35%
	45.45%		47.35%
	38.94%		47.35%
	45.01%		47.35%
	48.66%		47.35%
	42.97%		47.35%
	48.12%		47.35%
	43.46%		47.35%
	42.46%		47.35%
	50.88%		47.35%
	47.62%		47.35%
	52.06%		47.35%
	54.11%		47.35%
	52.75%		47.35%
	44.82%		47.35%
	46.74%		47.35%
	43.26%		47.35%
	40.49%		47.35%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

TIFT REGIONAL MEDICAL CENTER	110095	GA
JEFFERSON HOSPITAL	110100	GA
COOK MEDICAL CENTER	110101	GA
CRISP REGIONAL HOSPITAL	110104	GA
COLQUITT REGIONAL MEDICAL CENTER	110105	GA
MEDICAL CENTER OF CENTRAL GEORGIA	110107	GA
EMANUEL MEDICAL CENTER	110109	GA
UNIVERSITY HOSPITAL MCDUFFIE	110111	GA
BERRIEN COUNTY HOSPITAL	110112	GA
BURKE MEDICAL CENTER	110113	GA
ATLANTA MEDICAL CENTER	110115	GA
GRADY GENERAL HOSPITAL	110121	GA
SOUTH GEORGIA MEDICAL CENTER	110122	GA
WAYNE MEMORIAL HOSPITAL	110124	GA
FAIRVIEW PARK HOSPITAL	110125	GA
MEADOWS REGIONAL MEDICAL CENTER	110128	GA
ST FRANCIS HOSPITAL, INC	110129	GA
IRWIN COUNTY HOSPITAL	110130	GA
MEMORIAL HOSPITAL AND MANOR	110132	GA
TAYLOR REGIONAL HOSPITAL	110135	GA
EVANS MEMORIAL HOSPITAL	110142	GA
WELLSTAR COBB HOSPITAL	110143	GA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





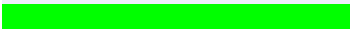
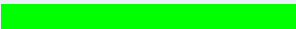
















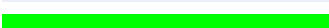
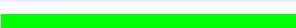
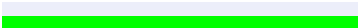
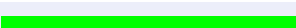
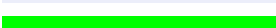
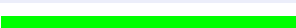
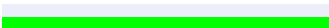
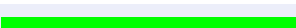
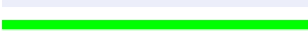
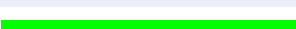
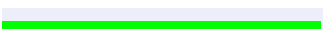
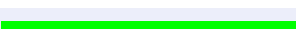
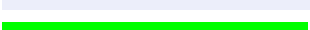
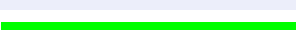
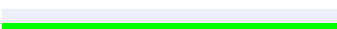
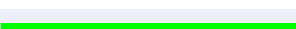
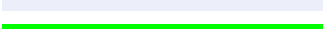
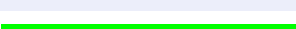


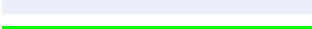
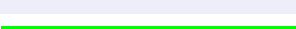
IP-Acute

Based on Spending Breakdown by Claim

\$8550.00	\$8442.00	\$8294.00
\$5050.00	\$8442.00	\$8294.00
\$5698.00	\$8442.00	\$8294.00
\$6360.00	\$8442.00	\$8294.00
\$7723.00	\$8442.00	\$8294.00
\$9593.00	\$8442.00	\$8294.00
\$5590.00	\$8442.00	\$8294.00
\$6558.00	\$8442.00	\$8294.00
\$5696.00	\$8442.00	\$8294.00
\$5821.00	\$8442.00	\$8294.00
\$8897.00	\$8442.00	\$8294.00
\$5758.00	\$8442.00	\$8294.00
\$8876.00	\$8442.00	\$8294.00
\$6105.00	\$8442.00	\$8294.00
\$7165.00	\$8442.00	\$8294.00
\$6753.00	\$8442.00	\$8294.00
\$8249.00	\$8442.00	\$8294.00
\$5173.00	\$8442.00	\$8294.00
\$5771.00	\$8442.00	\$8294.00
\$6847.00	\$8442.00	\$8294.00
\$6304.00	\$8442.00	\$8294.00
\$8172.00	\$8442.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	53.56%		47.35%
	48.34%		47.35%
	49.46%		47.35%
	46.23%		47.35%
	47.01%		47.35%
	50.61%		47.35%
	44.02%		47.35%
	42.94%		47.35%
	43.43%		47.35%
	46.24%		47.35%
	44.81%		47.35%
	46.46%		47.35%
	50.74%		47.35%
	38.99%		47.35%
	46.31%		47.35%
	43.4%		47.35%
	45.31%		47.35%
	43.43%		47.35%
	47.56%		47.35%
	45.72%		47.35%
	49.4%		47.35%
	44.15%		47.35%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

PHOEBE NORTH	110163	GA
SOUTHEAST GEORGIA HEALTH SYSTEM -- CAMDEN CAMPUS	110146	GA
OCONEE REGIONAL MEDICAL CENTER	110150	GA
PERRY HOSPITAL	110153	GA
NORTHSIDE HOSPITAL	110161	GA
COLISEUM MEDICAL CENTERS, LLC, DBA	110164	GA
SOUTHERN REGIONAL MEDICAL CENTER	110165	GA
REDMOND REGIONAL MEDICAL CENTER	110168	GA
DOCTORS HOSPITAL	110177	GA
EMORY-ADVENTIST HOSPITAL	110183	GA
WELLSTAR DOUGLAS HOSPITAL	110184	GA
DOCTORS HOSPITAL, INC	110186	GA
CHESTATEE REGIONAL HOSPITAL	110187	GA
FANNIN REGIONAL HOSPITAL	110189	GA
FLINT RIVER HOSPITAL	110190	GA
PIEDMONT HENRY HOSPITAL	110191	GA
EASTSIDE MEDICAL CENTER	110192	GA
DONALSONVILLE HOSPITAL INC	110194	GA
NORTH FULTON REGIONAL HOSPITAL	110198	GA
HUGHSTON HOSPITAL	110200	GA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7006.00	\$8442.00	\$8294.00
\$6290.00	\$8442.00	\$8294.00
\$7163.00	\$8442.00	\$8294.00
\$5983.00	\$8442.00	\$8294.00
\$10622.00	\$8442.00	\$8294.00
\$8198.00	\$8442.00	\$8294.00
\$7932.00	\$8442.00	\$8294.00
\$9164.00	\$8442.00	\$8294.00
\$9335.00	\$8442.00	\$8294.00
\$7203.00	\$8442.00	\$8294.00
\$6752.00	\$8442.00	\$8294.00
\$6862.00	\$8442.00	\$8294.00
\$7401.00	\$8442.00	\$8294.00
\$6145.00	\$8442.00	\$8294.00
\$5901.00	\$8442.00	\$8294.00
\$8190.00	\$8442.00	\$8294.00
\$7992.00	\$8442.00	\$8294.00
\$4595.00	\$8442.00	\$8294.00
\$7480.00	\$8442.00	\$8294.00
\$15619.00	\$8442.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.38%		47.35%
	45.9%		47.35%
	44.84%		47.35%
	42.71%		47.35%
	50.2%		47.35%
	48.15%		47.35%
	42.15%		47.35%
	49.65%		47.35%
	48.56%		47.35%
	41.09%		47.35%
	42.67%		47.35%
	43.06%		47.35%
	47.87%		47.35%
	43.71%		47.35%
	41.49%		47.35%
	46.55%		47.35%
	42.16%		47.35%
	50.86%		47.35%
	39.96%		47.35%
	60.41%		47.35%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

COLISEUM NORTHSIDE HOSPITAL	110201	GA
WESLEY WOODS GERIATRIC HOSPITAL	110203	GA
NORTH GEORGIA MEDICAL CENTER	110205	GA
TURNING POINT HOSPITAL	110209	GA
PIEDMONT FAYETTE HOSPITAL	110215	GA
SOUTH FULTON MEDICAL CENTER	110219	GA
PIEDMONT MOUNTAINSIDE HOSPITAL INC	110225	GA
DEKALB MEDICAL CENTER AT HILLANDALE	110226	GA
PIEDMONT NEWNAN HOSPITAL, INC	110229	GA
EMORY JOHNS CREEK HOSPITAL	110230	GA
THE QUEENS MEDICAL CENTER	120001	HI
MAUI MEMORIAL MEDICAL CENTER	120002	HI
WAHIAWA GENERAL HOSPITAL	120004	HI
HILO MEDICAL CENTER	120005	HI
CASTLE MEDICAL CENTER	120006	HI
KUAKINI MEDICAL CENTER	120007	HI
KAISER PERMANENTE MEDICAL CENTER - MOA	120011	HI
WILCOX MEMORIAL HOSPITAL	120014	HI
KONA COMMUNITY HOSPITAL	120019	HI
STRAUB CLINIC AND HOSPITAL	120022	HI
PALI MOMI MEDICAL CENTER	120026	HI
NORTH HAWAII COMMUNITY HOSPITAL	120028	HI

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





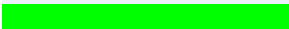
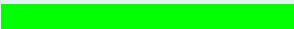
















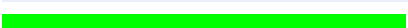
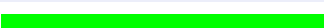
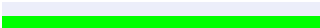
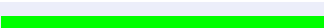
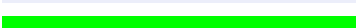
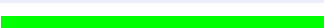
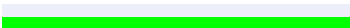
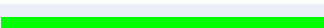
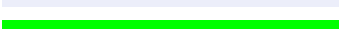
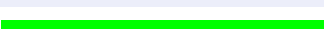
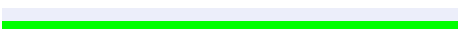
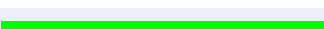
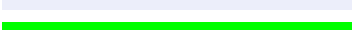
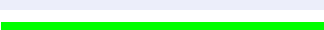
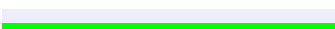
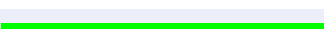
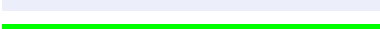
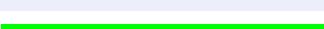


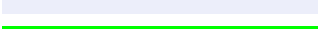
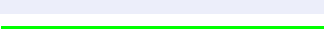
IP-Acute

Based on Spending Breakdown by Claim

\$8279.00	\$8442.00	\$8294.00
\$5370.00	\$8442.00	\$8294.00
\$6759.00	\$8442.00	\$8294.00
\$5637.00	\$8442.00	\$8294.00
\$8216.00	\$8442.00	\$8294.00
\$7266.00	\$8442.00	\$8294.00
\$7028.00	\$8442.00	\$8294.00
\$6747.00	\$8442.00	\$8294.00
\$7355.00	\$8442.00	\$8294.00
\$8295.00	\$8442.00	\$8294.00
\$9535.00	\$8641.00	\$8294.00
\$8394.00	\$8641.00	\$8294.00
\$6524.00	\$8641.00	\$8294.00
\$7312.00	\$8641.00	\$8294.00
\$7493.00	\$8641.00	\$8294.00
\$8994.00	\$8641.00	\$8294.00
\$9925.00	\$8641.00	\$8294.00
\$7015.00	\$8641.00	\$8294.00
\$6654.00	\$8641.00	\$8294.00
\$10012.00	\$8641.00	\$8294.00
\$8971.00	\$8641.00	\$8294.00
\$7012.00	\$8641.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	44.04%		47.35%
	28.84%		47.35%
	40.77%		47.35%
	42.6%		47.35%
	46.46%		47.35%
	41.67%		47.35%
	45.22%		47.35%
	42.39%		47.35%
	46.54%		47.35%
	47.65%		47.35%
	55.96%		52.12%
	57.3%		52.12%
	45.14%		52.12%
	50.3%		52.12%
	49.55%		52.12%
	47.81%		52.12%
	64.74%		52.12%
	49.75%		52.12%
	47.2%		52.12%
	53.71%		52.12%
	51.7%		52.12%
	44.89%		52.12%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

ST LUKES MAGIC VALLEY MEDICAL CENTER	130002	ID
ST JOSEPH REGIONAL MEDICAL CENTER	130003	ID
ST LUKES REGIONAL MEDICAL CENTER	130006	ID
ST ALPHONSUS REGIONAL MEDICAL CENTER	130007	ID
SAINT ALPHONSUS MEDICAL CENTER - NAMPA	130013	ID
WEST VALLEY MEDICAL CENTER	130014	ID
EASTERN IDAHO REGIONAL MEDICAL CENTER	130018	ID
MADISON MEMORIAL HOSPITAL	130025	ID
PORTNEUF MEDICAL CENTER	130028	ID
KOOTENAI MEDICAL CENTER	130049	ID
TREASURE VALLEY HOSPITAL	130063	ID
MOUNTAIN VIEW HOSPITAL	130065	ID
NORTHWEST SPECIALTY HOSPITAL	130066	ID
GRAHAM HOSPITAL ASSOCIATION	140001	IL
ALTON MEMORIAL HOSPITAL	140002	IL
PROVENA ST JOSEPH MEDICAL CENTER	140007	IL
LOYOLA GOTTLIEB MEMORIAL HOSPITAL	140008	IL
NORTHSHORE UNIVERSITY HEALTHSYSTEM - EVANSTON HOSPITAL	140010	IL
HERRIN HOSPITAL	140011	IL
KATHERINE SHAW BETHEA HOSPITAL	140012	IL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

	\$8063.00	\$9185.00	\$8294.00
	\$9595.00	\$9185.00	\$8294.00
	\$9778.00	\$9185.00	\$8294.00
	\$9901.00	\$9185.00	\$8294.00
	\$7383.00	\$9185.00	\$8294.00
	\$7175.00	\$9185.00	\$8294.00
	\$8689.00	\$9185.00	\$8294.00
	\$7494.00	\$9185.00	\$8294.00
	\$9443.00	\$9185.00	\$8294.00
	\$9558.00	\$9185.00	\$8294.00
	\$13612.00	\$9185.00	\$8294.00
	\$11258.00	\$9185.00	\$8294.00
	\$11618.00	\$9185.00	\$8294.00
	\$5798.00	\$7975.00	\$8294.00
	\$7816.00	\$7975.00	\$8294.00
	\$7581.00	\$7975.00	\$8294.00
	\$7957.00	\$7975.00	\$8294.00
	\$8434.00	\$7975.00	\$8294.00
	\$6771.00	\$7975.00	\$8294.00
	\$6342.00	\$7975.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	45.61%		50.3%
	52.42%		50.3%
	51.68%		50.3%
	51.69%		50.3%
	47.38%		50.3%
	45.95%		50.3%
	49.74%		50.3%
	52.05%		50.3%
	51.75%		50.3%
	48.8%		50.3%
	62.66%		50.3%
	61.26%		50.3%
	58.62%		50.3%
	44.33%		43.76%
	47.74%		43.76%
	41.59%		43.76%
	41.05%		43.76%
	43.76%		43.76%
	40.28%		43.76%
	47.45%		43.76%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

PROCTOR HOSPITAL	140013	IL
BLESSING HOSPITAL	140015	IL
MT SINAI HOSPITAL MEDICAL CENTER	140018	IL
SHELBY MEMORIAL HOSPITAL	140019	IL
ST MARYS HOSPITAL	140026	IL
COPLEY MEMORIAL HOSPITAL	140029	IL
SHERMAN HOSPITAL	140030	IL
ST ANTHONYS MEMORIAL HOSPITAL	140032	IL
ST MARYS HOSPITAL	140034	IL
GALESBURG COTTAGE HOSPITAL	140040	IL
CGH MEDICAL CENTER	140043	IL
GOOD SAMARITAN REGIONAL HLTH CENTER	140046	IL
ADVOCATE TRINITY HOSPITAL	140048	IL
VHS WEST SUBURBAN MEDICAL CENTER, INC., DBA WEST SUBURBAN MEDICAL CENTER	140049	IL
SKOKIE HOSPITAL	140051	IL
SAINT ANTHONY'S HEALTH CENTER	140052	IL
ST JOHNS HOSPITAL	140053	IL
MACNEAL HOSPITAL	140054	IL
PASSAVANT AREA HOSPITAL	140058	IL
JERSEY COMMUNITY HOSPITAL	140059	IL
PALOS COMMUNITY HOSPITAL	140062	IL

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





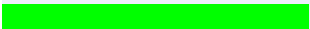
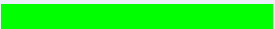
















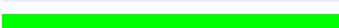
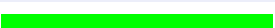
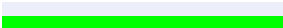
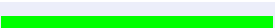












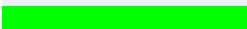
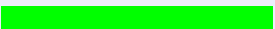


IP-Acute

Based on Spending Breakdown by Claim

\$8301.00	\$7975.00	\$8294.00
\$7549.00	\$7975.00	\$8294.00
\$7268.00	\$7975.00	\$8294.00
\$4833.00	\$7975.00	\$8294.00
\$7371.00	\$7975.00	\$8294.00
\$8449.00	\$7975.00	\$8294.00
\$8029.00	\$7975.00	\$8294.00
\$7729.00	\$7975.00	\$8294.00
\$6264.00	\$7975.00	\$8294.00
\$6824.00	\$7975.00	\$8294.00
\$7064.00	\$7975.00	\$8294.00
\$7978.00	\$7975.00	\$8294.00
\$6894.00	\$7975.00	\$8294.00
\$7947.00	\$7975.00	\$8294.00
\$8325.00	\$7975.00	\$8294.00
\$8086.00	\$7975.00	\$8294.00
\$10282.00	\$7975.00	\$8294.00
\$7798.00	\$7975.00	\$8294.00
\$7056.00	\$7975.00	\$8294.00
\$5483.00	\$7975.00	\$8294.00
\$7724.00	\$7975.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	48.81%		43.76%
	45.99%		43.76%
	43.58%		43.76%
	37.6%		43.76%
	48.9%		43.76%
	40.94%		43.76%
	43.86%		43.76%
	47.75%		43.76%
	43.03%		43.76%
	40.87%		43.76%
	44.33%		43.76%
	48.26%		43.76%
	39.99%		43.76%
	44.31%		43.76%
	40.07%		43.76%
	42.47%		43.76%
	54.41%		43.76%
	40.86%		43.76%
	45.45%		43.76%
	34.34%		43.76%
	42.39%		43.76%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

RUSH OAK PARK HOSPITAL	140063	IL
OSF ST MARY MEDICAL CENTER	140064	IL
ADVENTIST LA GRANGE MEMORIAL HOSPITAL	140065	IL
OSF SAINT FRANCIS MEDICAL CENTER	140067	IL
ROSELAND COMMUNITY HOSPITAL	140068	IL
TOUCHETTE REGIONAL HOSPITAL INC	140077	IL
RHC ST FRANCIS HOSPITAL	140080	IL
LOUIS A WEISS MEMORIAL HOSPITAL	140082	IL
LORETTO HOSPITAL	140083	IL
VISTA MEDICAL CENTER EAST	140084	IL
THE UNIVERSITY OF CHICAGO MEDICAL CENTER	140088	IL
MC DONOUGH DISTRICT HOSPITAL	140089	IL
CARLE FOUNDATION HOSPITAL	140091	IL
PROVENA UNITED SAMARITANS MEDCTR-LOGAN	140093	IL
SAINT ANTHONY HOSPITAL	140095	IL
MIDWESTERN REGION MED CENTER	140100	IL
MORRIS HOSPITAL AND HEALTHCARE CENTERS	140101	IL
ST BERNARD HOSPITAL & HEALTH CARE CENTER	140103	IL
OTTAWA REGIONAL HOSPITAL & HEALTHCARE CENTER	140110	IL
PROVENA COVENANT MEDICAL CENTER-URBANA	140113	IL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





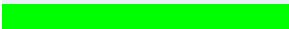
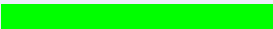
















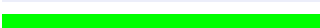
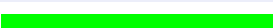
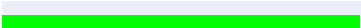
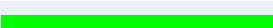
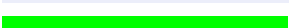
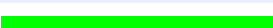
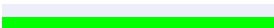
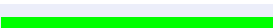
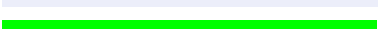
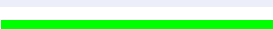
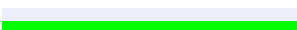
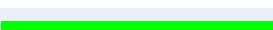
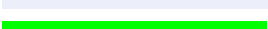
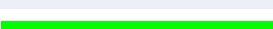




IP-Acute

Based on Spending Breakdown by Claim

\$7799.00	\$7975.00	\$8294.00
\$7187.00	\$7975.00	\$8294.00
\$7899.00	\$7975.00	\$8294.00
\$8756.00	\$7975.00	\$8294.00
\$6323.00	\$7975.00	\$8294.00
\$6228.00	\$7975.00	\$8294.00
\$7495.00	\$7975.00	\$8294.00
\$7918.00	\$7975.00	\$8294.00
\$5658.00	\$7975.00	\$8294.00
\$7095.00	\$7975.00	\$8294.00
\$10857.00	\$7975.00	\$8294.00
\$6218.00	\$7975.00	\$8294.00
\$9322.00	\$7975.00	\$8294.00
\$6602.00	\$7975.00	\$8294.00
\$6106.00	\$7975.00	\$8294.00
\$11379.00	\$7975.00	\$8294.00
\$7311.00	\$7975.00	\$8294.00
\$5673.00	\$7975.00	\$8294.00
\$6293.00	\$7975.00	\$8294.00
\$7371.00	\$7975.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	40.51%		43.76%
	43.45%		43.76%
	40.73%		43.76%
	49.6%		43.76%
	40.58%		43.76%
	45.17%		43.76%
	38.46%		43.76%
	39.19%		43.76%
	37.79%		43.76%
	40.94%		43.76%
	49.17%		43.76%
	45.1%		43.76%
	50.77%		43.76%
	40.57%		43.76%
	38.65%		43.76%
	53.24%		43.76%
	41.83%		43.76%
	37.55%		43.76%
	41.56%		43.76%
	46.52%		43.76%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

SWEDISH COVENANT HOSPITAL	140114	IL
THOREK MEMORIAL HOSPITAL	140115	IL
CENTEGRA HOSPITAL-MCHENRY	140116	IL
RESURRECTION MEDICAL CENTER	140117	IL
METROSOUTH MEDICAL CENTER	140118	IL
RUSH UNIVERSITY MEDICAL CENTER	140119	IL
PEKIN MEMORIAL HOSPITAL	140120	IL
HINSDALE HOSPITAL	140122	IL
JOHN H. STROGER, JR. HOSPITAL OF COOK COUNTY	140124	IL
GATEWAY REGIONAL MEDICAL CENTER	140125	IL
ADVOCATE HEALTH AND HOSPITAL CORPORATION, DBA BROMENN MEDICAL CENTER	140127	IL
NORTHWESTERN LAKE FOREST HOSPITAL	140130	IL
HOLY CROSS HOSPITAL	140133	IL
DECATUR MEMORIAL HOSPITAL	140135	IL
GREENVILLE REGIONAL HOSPITAL	140137	IL
ST MARGARET'S HOSPITAL	140143	IL
ST JOSEPHS HOSPITAL	140145	IL
RICHLAND MEMORIAL HOSPITAL	140147	IL
MEMORIAL MEDICAL CENTER, AN AFFILIATE OF MEMORIAL HEALTH SYSTEM	140148	IL
UNIVERSITY OF ILLINOIS HOSPITAL	140150	IL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient





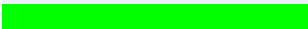
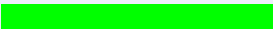
























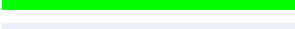
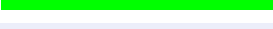
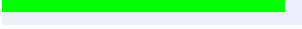
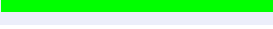


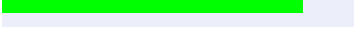
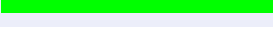


IP-Acute

Based on Spending Breakdown by Claim

	\$8330.00	\$7975.00	\$8294.00
	\$5800.00	\$7975.00	\$8294.00
	\$7926.00	\$7975.00	\$8294.00
	\$8843.00	\$7975.00	\$8294.00
	\$7909.00	\$7975.00	\$8294.00
	\$9632.00	\$7975.00	\$8294.00
	\$6663.00	\$7975.00	\$8294.00
	\$8057.00	\$7975.00	\$8294.00
	\$6964.00	\$7975.00	\$8294.00
	\$6847.00	\$7975.00	\$8294.00
	\$8168.00	\$7975.00	\$8294.00
	\$7388.00	\$7975.00	\$8294.00
	\$6640.00	\$7975.00	\$8294.00
	\$7642.00	\$7975.00	\$8294.00
	\$6252.00	\$7975.00	\$8294.00
	\$6160.00	\$7975.00	\$8294.00
	\$6894.00	\$7975.00	\$8294.00
	\$5658.00	\$7975.00	\$8294.00
	\$8966.00	\$7975.00	\$8294.00
	\$9250.00	\$7975.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	40.87%		43.76%
	34.83%		43.76%
	43.37%		43.76%
	37.91%		43.76%
	40.74%		43.76%
	49.1%		43.76%
	45.66%		43.76%
	41.64%		43.76%
	60.35%		43.76%
	44.57%		43.76%
	48.46%		43.76%
	43.52%		43.76%
	34.92%		43.76%
	46.95%		43.76%
	40.14%		43.76%
	41.59%		43.76%
	42.71%		43.76%
	39%		43.76%
	50.31%		43.76%
	49.59%		43.76%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

SACRED HEART HOSPITAL	140151	IL
PROVENA ST MARYS HOSPITAL	140155	IL
MERCY HOSPITAL AND MEDICAL CENTER	140158	IL
FHN MEMORIAL HOSPITAL	140160	IL
OSF SAINT JAMES HOSPITAL	140161	IL
OSF ST JOSEPH MEDICAL CENTER	140162	IL
MEMORIAL HOSPITAL OF CARBONDALE	140164	IL
ST MARYS HOSPITAL	140166	IL
IROQUOIS MEMORIAL HOSPITAL	140167	IL
FRANCISCAN ALLIANCE, INC., DBA, FRANCISCAN ST. JAMES HEALTH	140172	IL
PROVENA MERCY MEDICAL CENTER	140174	IL
CENTEGRA HEALTH SYSTEM - WOODSTOCK HOSPITAL	140176	IL
JACKSON PARK HOSPITAL	140177	IL
LITTLE COMPANY OF MARY HOSPITAL	140179	IL
ST MARY & ELIZABETH MED CTR-DIVISION CAMPUS	140180	IL
SOUTH SHORE HOSPITAL	140181	IL
ADVOCATE ILLINOIS MASONIC MEDICAL CENTER	140182	IL
HEARTLAND REGIONAL MEDICAL CENTER	140184	IL
MEMORIAL HOSPITAL	140185	IL

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$5401.00	\$7975.00	\$8294.00
\$7128.00	\$7975.00	\$8294.00
\$7513.00	\$7975.00	\$8294.00
\$6911.00	\$7975.00	\$8294.00
\$8214.00	\$7975.00	\$8294.00
\$8146.00	\$7975.00	\$8294.00
\$9128.00	\$7975.00	\$8294.00
\$7708.00	\$7975.00	\$8294.00
\$6742.00	\$7975.00	\$8294.00
\$6947.00	\$7975.00	\$8294.00
\$8481.00	\$7975.00	\$8294.00
\$7186.00	\$7975.00	\$8294.00
\$5401.00	\$7975.00	\$8294.00
\$7371.00	\$7975.00	\$8294.00
\$6745.00	\$7975.00	\$8294.00
\$6039.00	\$7975.00	\$8294.00
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\$7941.00	\$7975.00	\$8294.00

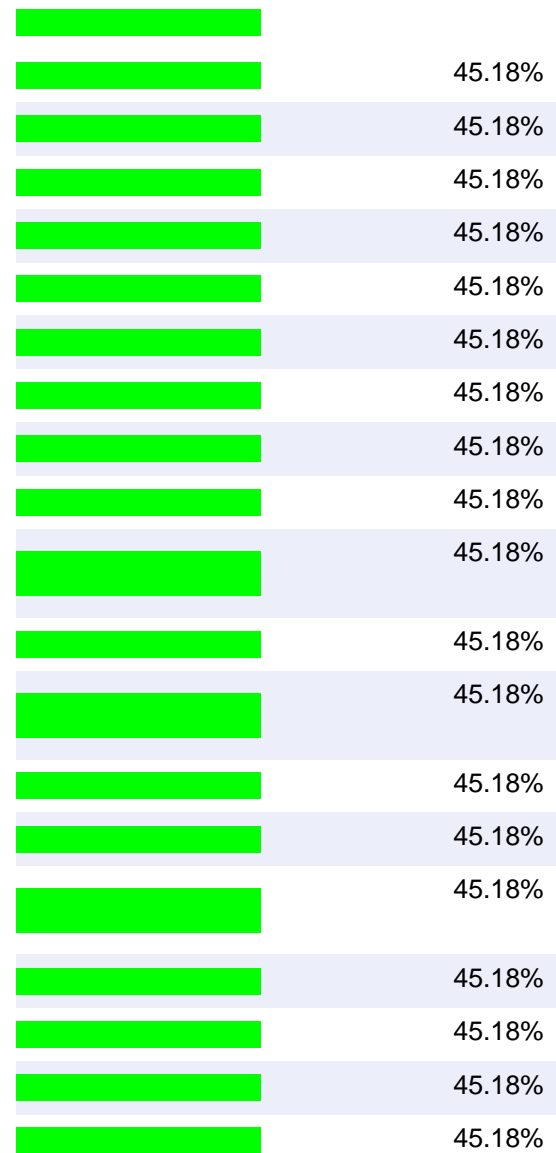
IP-Acute

Based on Spending Breakdown by Claim

	37.88%		43.76%
	43.2%		43.76%
	43.51%		43.76%
	43.77%		43.76%
	43.05%		43.76%
	50.33%		43.76%
	48.96%		43.76%
	46.66%		43.76%
	48.05%		43.76%
	42.21%		43.76%
	44.73%		43.76%
	42.3%		43.76%
	39.6%		43.76%
	38.46%		43.76%
	41.09%		43.76%
	37.17%		43.76%
	39.64%		43.76%
	45.09%		43.76%
	47.07%		43.76%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

RIVERSIDE MEDICAL CENTER	140186	IL
ST ELIZABETH'S HOSPITAL	140187	IL
SARAH BUSH LINCOLN HEALTH CENTER	140189	IL
INGALLS MEMORIAL HOSPITAL	140191	IL
METHODIST HOSPITAL OF CHICAGO	140197	IL
ELMHURST MEMORIAL HOSPITAL	140200	IL
ADVOCATE CONDELL MEDICAL CENTER	140202	IL
NORWEGIAN-AMERICAN HOSPITAL	140206	IL
ADVOCATE CHRIST HOSPITAL & MEDICAL CENTER	140208	IL
METHODIST MEDICAL CENTER OF ILLINOIS	140209	IL
HARRISBURG MEDICAL CENTER	140210	IL
DELNOR COMMUNITY HOSPITAL	140211	IL
SILVER CROSS HOSPITAL AND MEDICAL CENTERS	140213	IL
PROVENA ST JOSEPH HOSPITAL	140217	IL
ADVOCATE LUTHERAN GENERAL HOSPITAL	140223	IL
SAINT JOSEPH HOSPITAL	140224	IL
SWEDISH AMERICAN HOSPITAL	140228	IL
EDWARD HOSPITAL	140231	IL
OSF SAINT ANTHONY MEDICAL CENTER	140233	IL

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$8327.00	\$7975.00	\$8294.00
\$8073.00	\$7975.00	\$8294.00
\$6491.00	\$7975.00	\$8294.00
\$7397.00	\$7975.00	\$8294.00
\$5501.00	\$7975.00	\$8294.00
\$8312.00	\$7975.00	\$8294.00
\$7641.00	\$7975.00	\$8294.00
\$6114.00	\$7975.00	\$8294.00
\$9028.00	\$7975.00	\$8294.00
\$8267.00	\$7975.00	\$8294.00
\$5554.00	\$7975.00	\$8294.00
\$7291.00	\$7975.00	\$8294.00
\$6951.00	\$7975.00	\$8294.00
\$8132.00	\$7975.00	\$8294.00
\$8516.00	\$7975.00	\$8294.00
\$7528.00	\$7975.00	\$8294.00
\$7913.00	\$7975.00	\$8294.00
\$8242.00	\$7975.00	\$8294.00
\$9354.00	\$7975.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.69%		43.76%
	46.35%		43.76%
	42.72%		43.76%
	42.73%		43.76%
	36.15%		43.76%
	42.76%		43.76%
	41.43%		43.76%
	39.27%		43.76%
	43.65%		43.76%
	45.9%		43.76%
	41.22%		43.76%
	41.77%		43.76%
	40.39%		43.76%
	39.28%		43.76%
	40.73%		43.76%
	39.51%		43.76%
	45.7%		43.76%
	44.02%		43.76%
	45.94%		43.76%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

ILLINOIS VALLEY COMMUNITY HOSPITAL	140234	IL
ROCKFORD MEMORIAL HOSPITAL	140239	IL
VHS WESTLAKE HOSPITAL, INC., DBA WESTLAKE HOSPITAL	140240	IL
CENTRAL DUPAGE HOSPITAL	140242	IL
ADVOCATE SOUTH SUBURBAN HOSPITAL	140250	IL
OUR LADY OF THE RESURRECTION MED CTR	140251	IL
NORTHWEST COMMUNITY HOSPITAL	140252	IL
ALEXIAN BROTHERS MEDICAL CENTER	140258	IL
GENESIS MEDICAL CENTER ILLINI CAMPUS	140275	IL
LOYOLA UNIVERSITY MEDICAL CENTER	140276	IL
TRINITY ROCK ISLAND	140280	IL
NORTHWESTERN MEMORIAL HOSPITAL	140281	IL
KISHWAUKEE COMMUNITY HOSPITAL	140286	IL
ADVOCATE GOOD SAMARITAN HOSPITAL	140288	IL
ANDERSON HOSPITAL	140289	IL
ST ALEXIUS MEDICAL CENTER	140290	IL
ADVOCATE GOOD SHEPHERD HOSPITAL	140291	IL
ADVENTIST GLENOAKS	140292	IL
CROSSROADS COMMUNITY HOSPITAL	140294	IL
PROVIDENT HOSPITAL OF CHICAGO	140300	IL
ADVENTIST BOLINGBROOK HOSPITAL	140304	IL

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

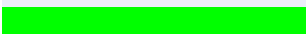
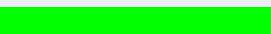


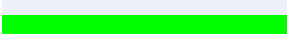
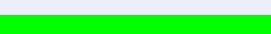




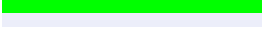
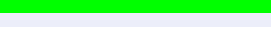


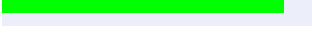
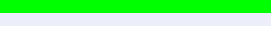
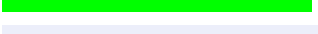
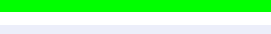
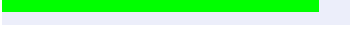
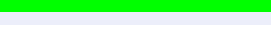






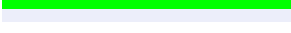
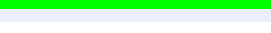
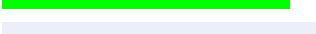
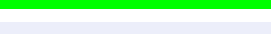
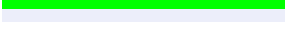
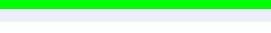
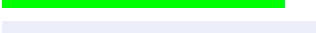
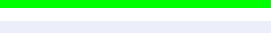
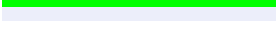
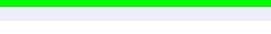
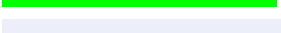
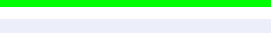
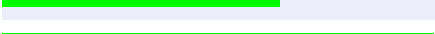
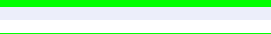
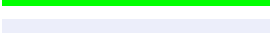
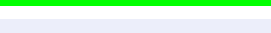
IP-Acute

Based on Spending Breakdown by Claim

\$6313.00	\$7975.00	\$8294.00
\$8390.00	\$7975.00	\$8294.00
\$8504.00	\$7975.00	\$8294.00
\$8805.00	\$7975.00	\$8294.00
\$7369.00	\$7975.00	\$8294.00
\$7832.00	\$7975.00	\$8294.00
\$8181.00	\$7975.00	\$8294.00
\$9129.00	\$7975.00	\$8294.00
\$7747.00	\$7975.00	\$8294.00
\$10127.00	\$7975.00	\$8294.00
\$8686.00	\$7975.00	\$8294.00
\$9407.00	\$7975.00	\$8294.00
\$7245.00	\$7975.00	\$8294.00
\$8092.00	\$7975.00	\$8294.00
\$7575.00	\$7975.00	\$8294.00
\$7892.00	\$7975.00	\$8294.00
\$8370.00	\$7975.00	\$8294.00
\$7327.00	\$7975.00	\$8294.00
\$6437.00	\$7975.00	\$8294.00
\$4249.00	\$7975.00	\$8294.00
\$7451.00	\$7975.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.14%		43.76%
	47.04%		43.76%
	40.49%		43.76%
	46.41%		43.76%
	42.4%		43.76%
	37.07%		43.76%
	39.97%		43.76%
	44.02%		43.76%
	44.97%		43.76%
	49.62%		43.76%
	48.99%		43.76%
	49.34%		43.76%
	43.8%		43.76%
	40.77%		43.76%
	44.22%		43.76%
	40.19%		43.76%
	44.41%		43.76%
	39.03%		43.76%
	39.49%		43.76%
	61.26%		43.76%
	38.13%		43.76%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

JOHNSON MEMORIAL HOSPITAL	150001	IN
METHODIST HOSPITALS INC	150002	IN
FRANCISCAN ST ELIZABETH HEALTH - LAFAYETTE CENTRAL	150003	IN
FRANCISCAN ST. MARGARET HEALTH HAMMOND	150004	IN
HENDRICKS REGIONAL HEALTH	150005	IN
INDIANA UNIVERSITY HEALTH LA PORTE HOSPITAL	150006	IN
COMMUNITY HOWARD REGIONAL HEALTH, INC	150007	IN
ST. CATHERINE HOSPITAL, INC	150008	IN
CLARK MEMORIAL HOSPITAL	150009	IN
ST. JOSEPH HOSPITAL & HEALTH CENTER, INC	150010	IN
MARION GENERAL HOSPITAL	150011	IN
SAINT JOSEPH REGIONAL MEDICAL CENTER - SOUTH BEND	150012	IN
FRANCISCAN ST ANTHONY HEALTH - MICHIGAN CITY	150015	IN
LUTHERAN HOSPITAL OF INDIANA	150017	IN
ELKHART GENERAL HOSPITAL	150018	IN
PARKVIEW REGIONAL MEDICAL CENTER	150021	IN
FRANCISCAN ST ELIZABETH HEALTH - CRAWFORDSVILLE	150022	IN
UNION HOSPITAL INC	150023	IN

IP-Acute

Based on Spending Breakdown by Claim

[illegible]













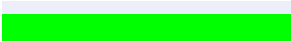
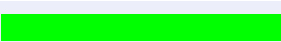


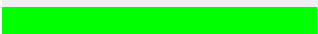
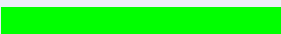


















IP-Acute

Based on Spending Breakdown by Claim

\$7600.00	\$8292.00	\$8294.00
\$7705.00	\$8292.00	\$8294.00
\$6154.00	\$8292.00	\$8294.00
\$7439.00	\$8292.00	\$8294.00
\$6979.00	\$8292.00	\$8294.00
\$8037.00	\$8292.00	\$8294.00
\$8148.00	\$8292.00	\$8294.00
\$7170.00	\$8292.00	\$8294.00
\$7285.00	\$8292.00	\$8294.00
\$8179.00	\$8292.00	\$8294.00
\$7177.00	\$8292.00	\$8294.00
\$8165.00	\$8292.00	\$8294.00
\$7106.00	\$8292.00	\$8294.00
\$9452.00	\$8292.00	\$8294.00
\$8254.00	\$8292.00	\$8294.00
\$9018.00	\$8292.00	\$8294.00
\$5577.00	\$8292.00	\$8294.00
\$8066.00	\$8292.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	41.14%		45.04%
	38.71%		45.04%
	37.41%		45.04%
	39.38%		45.04%
	44.94%		45.04%
	44.75%		45.04%
	41.28%		45.04%
	39.01%		45.04%
	44.67%		45.04%
	41.02%		45.04%
	42.66%		45.04%
	44.43%		45.04%
	43.97%		45.04%
	48.27%		45.04%
	48.03%		45.04%
	46.98%		45.04%
	40.74%		45.04%
	44.81%		45.04%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%
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	45.18%
	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

WILLIAM N WISHARD MEMORIAL HOSPITAL	150024	IN
INDIANA UNIVERSITY HEALTH GOSHEN HOSPITAL	150026	IN
HENRY COUNTY MEMORIAL HOSPITAL	150030	IN
ST. MARY MEDICAL CENTER, INC.	150034	IN
PORTER VALPARAISO HOSPITAL	150035	IN
HANCOCK REGIONAL HOSPITAL	150037	IN
INDIANA UNIVERSITY HEALTH MORGAN HOSPITAL INC	150038	IN
GOOD SAMARITAN HOSPITAL	150042	IN
FLOYD MEMORIAL HOSPITAL AND HEALTH SERVICES	150044	IN
DEKALB MEMORIAL HOSPITAL, INC. D/B/A DEKALB HEALTH	150045	IN
TERRE HAUTE REGIONAL HOSPITAL	150046	IN
ST JOSEPH HOSPITAL	150047	IN
REID HOSPITAL & HEALTH CARE SERVICES	150048	IN
INDIANA UNIVERSITY HEALTH BLOOMINGTON HOSPITAL	150051	IN
INDIANA UNIVERSITY HEALTH METHODIST HOSPITAL (INDIANAPOLIS)	150056	IN
FRANCISCAN ST FRANCIS HEALTH - MOORESVILLE	150057	IN
MEMORIAL HOSPITAL OF SOUTH BEND	150058	IN
RIVERVIEW HOSPITAL	150059	IN

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





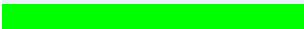
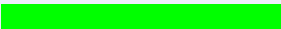














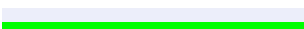
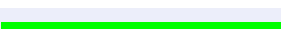
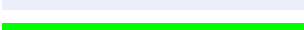
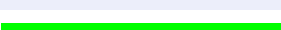
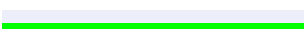
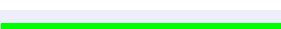
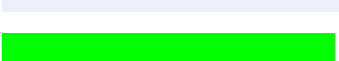
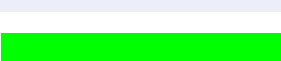
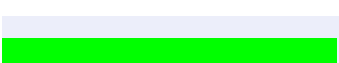
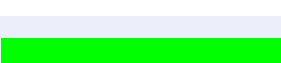
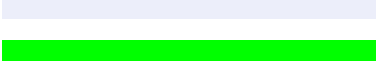
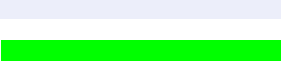




IP-Acute

Based on Spending Breakdown by Claim

\$7933.00	\$8292.00	\$8294.00
\$7397.00	\$8292.00	\$8294.00
\$6855.00	\$8292.00	\$8294.00
\$7605.00	\$8292.00	\$8294.00
\$8094.00	\$8292.00	\$8294.00
\$7820.00	\$8292.00	\$8294.00
\$6021.00	\$8292.00	\$8294.00
\$7984.00	\$8292.00	\$8294.00
\$8160.00	\$8292.00	\$8294.00
\$5331.00	\$8292.00	\$8294.00
\$8470.00	\$8292.00	\$8294.00
\$7337.00	\$8292.00	\$8294.00
\$8369.00	\$8292.00	\$8294.00
\$8996.00	\$8292.00	\$8294.00
\$10084.00	\$8292.00	\$8294.00
\$10732.00	\$8292.00	\$8294.00
\$8489.00	\$8292.00	\$8294.00
\$7974.00	\$8292.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	47.61%		45.04%
	42.58%		45.04%
	43.04%		45.04%
	43.24%		45.04%
	43.26%		45.04%
	42.58%		45.04%
	36.9%		45.04%
	42.4%		45.04%
	44.49%		45.04%
	39.24%		45.04%
	42.8%		45.04%
	44.82%		45.04%
	45.51%		45.04%
	47.21%		45.04%
	47.57%		45.04%
	53.11%		45.04%
	46.75%		45.04%
	41.03%		45.04%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

DAVIESS COMMUNITY HOSPITAL	150061	IN
FAYETTE REGIONAL HEALTH SYSTEM	150064	IN
SCHNECK MEDICAL CENTER	150065	IN
THE KING'S DAUGHTERS' HOSPITAL AND HEALTH SERVICES	150069	IN
MEMORIAL HOSPITAL	150072	IN
COMMUNITY HOSPITAL EAST	150074	IN
BLUFFTON REGIONAL MEDICAL CENTER	150075	IN
SAINT JOSEPH'S REGIONAL MEDICAL CENTER - PLYMOUTH	150076	IN
DEACONESS HOSPITAL INC	150082	IN
ST. VINCENT HOSPITALS AND HEALTH SERVICES	150084	IN
DEARBORN COUNTY HOSPITAL	150086	IN
SAINT JOHN'S HEALTH SYSTEM	150088	IN
INDIANA UNIVERSITY HEALTH BALL MEMORIAL HOSPITAL	150089	IN
FRANCISCAN ST. MARGARET HEALTH DYER	150090	IN
PARKVIEW HUNTINGTON HOSPITAL	150091	IN
MAJOR HOSPITAL	150097	IN
ST. MARY'S MEDICAL CENTER OF EVANSVILLE INC	150100	IN
PARKVIEW WHITLEY HOSPITAL	150101	IN

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$5584.00	\$8292.00	\$8294.00
\$6498.00	\$8292.00	\$8294.00
\$8228.00	\$8292.00	\$8294.00
\$6796.00	\$8292.00	\$8294.00
\$6439.00	\$8292.00	\$8294.00
\$7414.00	\$8292.00	\$8294.00
\$5899.00	\$8292.00	\$8294.00
\$7580.00	\$8292.00	\$8294.00
\$7738.00	\$8292.00	\$8294.00
\$9351.00	\$8292.00	\$8294.00
\$6516.00	\$8292.00	\$8294.00
\$7617.00	\$8292.00	\$8294.00
\$7963.00	\$8292.00	\$8294.00
\$7960.00	\$8292.00	\$8294.00
\$5806.00	\$8292.00	\$8294.00
\$6431.00	\$8292.00	\$8294.00
\$8554.00	\$8292.00	\$8294.00
\$5425.00	\$8292.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	31.97%		45.04%
	40.83%		45.04%
	45.92%		45.04%
	44.86%		45.04%
	35.86%		45.04%
	43.41%		45.04%
	44.46%		45.04%
	40.91%		45.04%
	43.14%		45.04%
	45.95%		45.04%
	42.95%		45.04%
	42.16%		45.04%
	45.57%		45.04%
	44.16%		45.04%
	41.24%		45.04%
	37.44%		45.04%
	46.64%		45.04%
	44.49%		45.04%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

INDIANA UNIVERSITY HEALTH STARKE HOSPITAL	150102	IN
WITHAM HEALTH SERVICES	150104	IN
FRANCISCAN ST ELIZABETH HEALTH - LAFAYETTE EAST	150109	IN
COLUMBUS REGIONAL HOSPITAL	150112	IN
COMMUNITY HOSPITAL OF ANDERSON AND MADISON COUNTY	150113	IN
MEMORIAL HOSPITAL AND HEALTH CARE CENTER	150115	IN
COMMUNITY HOSPITAL	150125	IN
FRANCISCAN SAINT ANTHONY HEALTH - CROWN POINT	150126	IN
COMMUNITY HOSPITAL SOUTH, INC.	150128	IN
COMMUNITY WESTVIEW HOSPITAL	150129	IN
KOSCIUSKO COMMUNITY HOSPITAL	150133	IN
PARKVIEW NOBLE HOSPITAL	150146	IN
DUPONT HOSPITAL LLC	150150	IN
ST. VINCENT HEART CENTER OF INDIANA, LLC	150153	IN
INDIANA HEART HOSPITAL THE	150154	IN
ST. VINCENT CARMEL HOSPITAL, INC.	150157	IN
IU HEALTH WEST HOSPITAL	150158	IN
INDIANA ORTHOPAEDIC HOSPITAL LLC	150160	IN
INDIANA UNIVERSITY HEALTH NORTH HOSPITAL	150161	IN

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





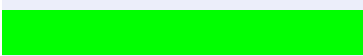
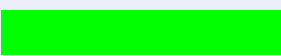


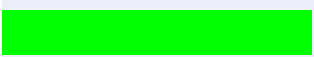
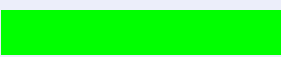


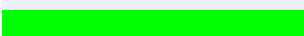
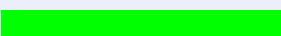


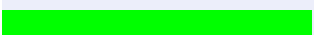
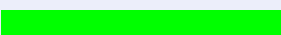




















IP-Acute

Based on Spending Breakdown by Claim

\$6185.00	\$8292.00	\$8294.00
\$6053.00	\$8292.00	\$8294.00
\$10444.00	\$8292.00	\$8294.00
\$7872.00	\$8292.00	\$8294.00
\$7020.00	\$8292.00	\$8294.00
\$8317.00	\$8292.00	\$8294.00
\$8228.00	\$8292.00	\$8294.00
\$7760.00	\$8292.00	\$8294.00
\$8372.00	\$8292.00	\$8294.00
\$6692.00	\$8292.00	\$8294.00
\$6088.00	\$8292.00	\$8294.00
\$5615.00	\$8292.00	\$8294.00
\$7876.00	\$8292.00	\$8294.00
\$13230.00	\$8292.00	\$8294.00
\$12616.00	\$8292.00	\$8294.00
\$9405.00	\$8292.00	\$8294.00
\$7056.00	\$8292.00	\$8294.00
\$11967.00	\$8292.00	\$8294.00
\$10316.00	\$8292.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	48.7%		45.04%
	39.96%		45.04%
	51.2%		45.04%
	45.59%		45.04%
	43.94%		45.04%
	45.93%		45.04%
	42.8%		45.04%
	43.68%		45.04%
	43.9%		45.04%
	39.09%		45.04%
	37.4%		45.04%
	42.52%		45.04%
	46.15%		45.04%
	63.68%		45.04%
	59.67%		45.04%
	50.86%		45.04%
	42.15%		45.04%
	61.27%		45.04%
	54.81%		45.04%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

FRANCISCAN ST. FRANCIS HEALTH - INDIANAPOLIS	150162	IN
SAINT CATHERINE REGIONAL HOSPITAL	150163	IN
MONROE HOSPITAL	150164	IN
FRANCISCAN PHYSICIANS HOSPITAL LLC	150165	IN
PINNACLE HOSPITAL	150166	IN
ORTHOPAEDIC HOSPITAL AT PARKVIEW NORTH LLC	150167	IN
THE ORTHOPEDIC HOSPITAL	150168	IN
COMMUNITY HOSPITAL NORTH	150169	IN
PHYSICIANS' MEDICAL CENTER LLC	150172	IN
INDIANA UNIVERSITY HEALTH ARNETT HOSPITAL	150173	IN
THE HEART HOSPITAL AT DEACONESS GATEWAY LLC	150175	IN
KENTUCKIANA MEDICAL CENTER LLC	150176	IN
UNITY MEDICAL AND SURGICAL HOSPITAL	150177	IN
MARSHALLTOWN MEDICAL & SURGICAL CENTER	160001	IA
ST ANTHONY REGIONAL HOSPITAL & NURSIING HOME	160005	IA
KEOKUK AREA HOSPITAL	160008	IA
UNITY HEALTHCARE DBA TRINITY MUSCATINE	160013	IA
TRINITY REGIONAL MEDICAL CENTER	160016	IA
IOWA LUTHERAN HOSPITAL	160024	IA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





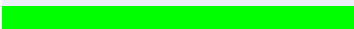
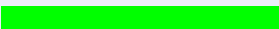










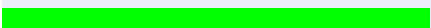
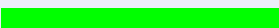






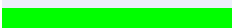
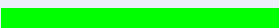












IP-Acute

Based on Spending Breakdown by Claim

\$9542.00	\$8292.00	\$8294.00
\$4909.00	\$8292.00	\$8294.00
\$8805.00	\$8292.00	\$8294.00
\$9429.00	\$8292.00	\$8294.00
\$6364.00	\$8292.00	\$8294.00
\$13637.00	\$8292.00	\$8294.00
\$13379.00	\$8292.00	\$8294.00
\$8633.00	\$8292.00	\$8294.00
\$5595.00	\$8292.00	\$8294.00
\$9220.00	\$8292.00	\$8294.00
\$15270.00	\$8292.00	\$8294.00
\$11005.00	\$8292.00	\$8294.00
\$7545.00	\$8292.00	\$8294.00
\$7211.00	\$8490.00	\$8294.00
\$7872.00	\$8490.00	\$8294.00
\$5769.00	\$8490.00	\$8294.00
\$6719.00	\$8490.00	\$8294.00
\$7975.00	\$8490.00	\$8294.00
\$8267.00	\$8490.00	\$8294.00

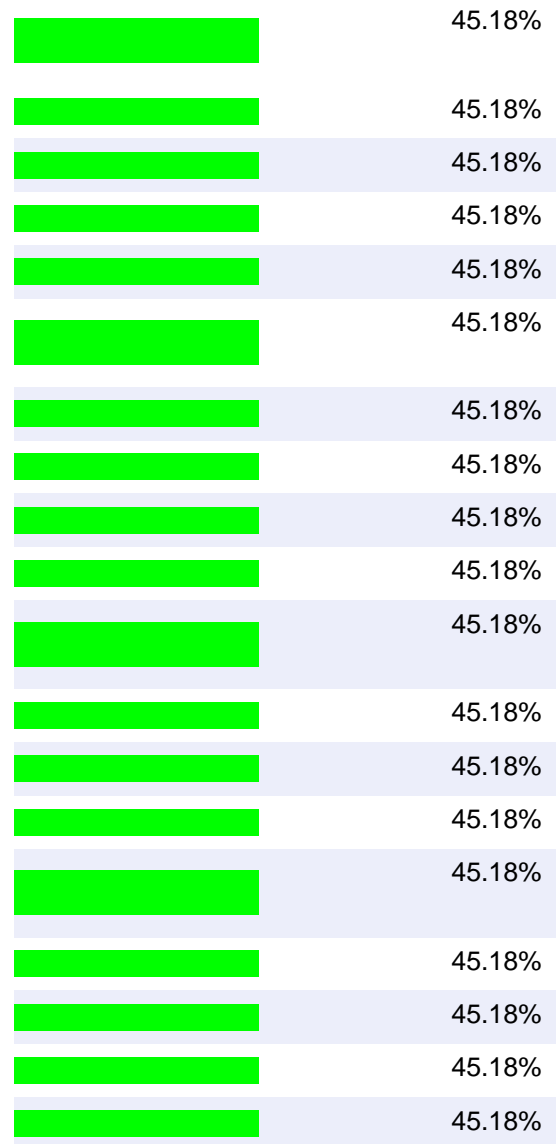
IP-Acute

Based on Spending Breakdown by Claim

	50.58%		45.04%
	34.28%		45.04%
	50.28%		45.04%
	58.44%		45.04%
	46.01%		45.04%
	58.93%		45.04%
	53.64%		45.04%
	43.96%		45.04%
	60.71%		45.04%
	45.44%		45.04%
	68.87%		45.04%
	59.22%		45.04%
	32.66%		45.04%
	51.27%		50.14%
	45.07%		50.14%
	43%		50.14%
	47.89%		50.14%
	51.52%		50.14%
	52.3%		50.14%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

ALEGENT HEALTH MERCY HOSPITAL	160028	IA
MERCY HOSPITAL	160029	IA
MARY GREELEY MEDICAL CENTER	160030	IA
SKIFF MEDICAL CENTER	160032	IA
GENESIS MEDICAL CENTER-DAVENPORT	160033	IA
SARTORI MEMORIAL HOSPITAL, INC	160040	IA
ST LUKES HOSPITAL	160045	IA
JENNIE EDMUNDSON HOSPITAL	160047	IA
GREAT RIVER MEDICAL CENTER	160057	IA
UNIVERSITY OF IOWA HOSPITAL & CLINICS	160058	IA
MERCY MEDICAL CENTER-NORTH IOWA	160064	IA
COVENANT MEDICAL CENTER	160067	IA
MERCY MEDICAL CENTER-DUBUQUE	160069	IA
MERCY MEDICAL CENTER - CEDAR RAPIDS	160079	IA
MERCY MEDICAL CENTER-CLINTON	160080	IA
IOWA METHODIST MEDICAL CENTER	160082	IA
MERCY MEDICAL CENTER-DES MOINES	160083	IA
OTTUMWA REGIONAL HEALTH CENTER	160089	IA
BROADLAWNS MEDICAL CENTER	160101	IA
TRINITY AT TERRACE PARK	160104	IA
ALLEN MEMORIAL HOSPITAL	160110	IA
SPENCER MUNICIPAL HOSPITAL	160112	IA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





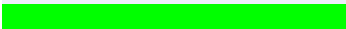
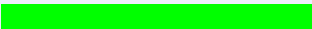
















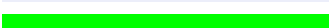
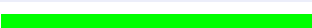
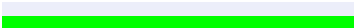
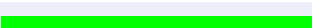
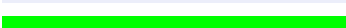
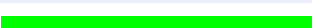
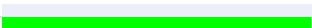
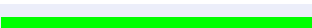
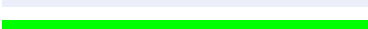
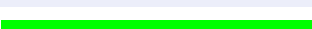
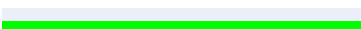
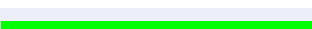
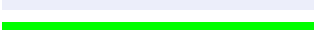
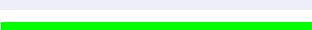
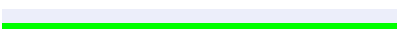
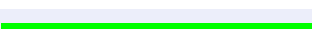
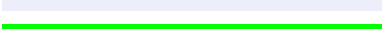
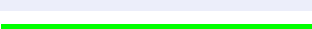


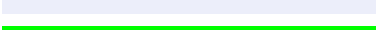
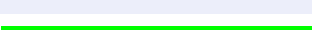
IP-Acute

Based on Spending Breakdown by Claim

\$7734.00	\$8490.00	\$8294.00
\$8786.00	\$8490.00	\$8294.00
\$7934.00	\$8490.00	\$8294.00
\$5967.00	\$8490.00	\$8294.00
\$8668.00	\$8490.00	\$8294.00
\$7482.00	\$8490.00	\$8294.00
\$8485.00	\$8490.00	\$8294.00
\$7696.00	\$8490.00	\$8294.00
\$8332.00	\$8490.00	\$8294.00
\$10564.00	\$8490.00	\$8294.00
\$8333.00	\$8490.00	\$8294.00
\$8080.00	\$8490.00	\$8294.00
\$8421.00	\$8490.00	\$8294.00
\$8521.00	\$8490.00	\$8294.00
\$7296.00	\$8490.00	\$8294.00
\$9628.00	\$8490.00	\$8294.00
\$9298.00	\$8490.00	\$8294.00
\$7400.00	\$8490.00	\$8294.00
\$5546.00	\$8490.00	\$8294.00
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\$8532.00	\$8490.00	\$8294.00
\$7712.00	\$8490.00	\$8294.00

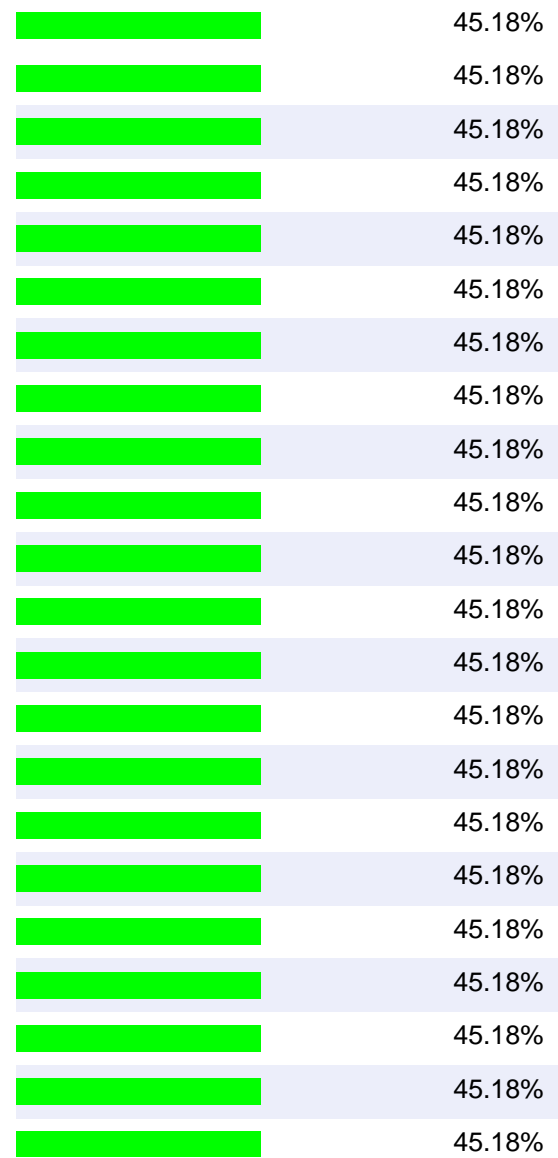
IP-Acute

Based on Spending Breakdown by Claim

	50.02%		50.14%
	57.36%		50.14%
	48.85%		50.14%
	47.45%		50.14%
	49.72%		50.14%
	44.23%		50.14%
	52.3%		50.14%
	48.76%		50.14%
	53.44%		50.14%
	50.46%		50.14%
	50.69%		50.14%
	46.54%		50.14%
	50.14%		50.14%
	48.73%		50.14%
	43.83%		50.14%
	51.9%		50.14%
	51.08%		50.14%
	44.41%		50.14%
	55.99%		50.14%
	54.17%		50.14%
	50.26%		50.14%
	53.06%		50.14%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

THE FINLEY HOSPITAL	160117	IA
FORT MADISON COMMUNITY HOSPITAL	160122	IA
LAKES REGIONAL HEALTHCARE	160124	IA
ST LUKES REGIONAL MEDICAL CENTER	160146	IA
GRINNELL REGIONAL MEDICAL CENTER	160147	IA
MERCY MEDICAL CENTER-SIOUX CITY	160153	IA
NEWMAN REGIONAL HEALTH	170001	KS
VIA CHRISTI HOSPITAL PITTSBURG INC	170006	KS
SAINT JOHN HOSPITAL	170009	KS
MERCY HOSPITAL INDEPENDENCE	170010	KS
SALINA REGIONAL HEALTH CENTER	170012	KS
HAYS MEDICAL CENTER	170013	KS
RANSOM MEMORIAL HOSPITAL	170014	KS
ST FRANCIS HEALTH CENTER	170016	KS
SUSAN B ALLEN MEMORIAL HOSPITAL	170017	KS
HUTCHINSON REGIONAL MEDICAL CENTER	170020	KS
ST CATHERINE HOSPITAL	170023	KS
PRATT REGIONAL MEDICAL CENTER	170027	KS
SUMNER REGIONAL MEDICAL CENTER	170039	KS
UNIVERSITY OF KANSAS HOSPITAL	170040	KS
OLATHE MEDICAL CENTER	170049	KS

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7324.00	\$8490.00	\$8294.00
\$6420.00	\$8490.00	\$8294.00
\$6427.00	\$8490.00	\$8294.00
\$8071.00	\$8490.00	\$8294.00
\$6709.00	\$8490.00	\$8294.00
\$9088.00	\$8490.00	\$8294.00
\$6485.00	\$8836.00	\$8294.00
\$7078.00	\$8836.00	\$8294.00
\$6225.00	\$8836.00	\$8294.00
\$6908.00	\$8836.00	\$8294.00
\$8836.00	\$8836.00	\$8294.00
\$9738.00	\$8836.00	\$8294.00
\$6006.00	\$8836.00	\$8294.00
\$9492.00	\$8836.00	\$8294.00
\$7344.00	\$8836.00	\$8294.00
\$8191.00	\$8836.00	\$8294.00
\$8534.00	\$8836.00	\$8294.00
\$9259.00	\$8836.00	\$8294.00
\$5465.00	\$8836.00	\$8294.00
\$11012.00	\$8836.00	\$8294.00
\$7992.00	\$8836.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.42%		50.14%
	50.62%		50.14%
	46.63%		50.14%
	48.8%		50.14%
	50.48%		50.14%
	47.09%		50.14%
	45.57%		47.82%
	46.97%		47.82%
	41.25%		47.82%
	45.91%		47.82%
	44.41%		47.82%
	46.67%		47.82%
	40.79%		47.82%
	47.86%		47.82%
	47.72%		47.82%
	45.97%		47.82%
	48.45%		47.82%
	48.87%		47.82%
	45.69%		47.82%
	53.47%		47.82%
	45.37%		47.82%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

MERCY HEALTH SYSTEM OF KS	170058	KS
SOUTHWEST MEDICAL CENTER	170068	KS
GEARY COMMUNITY HOSPITAL	170074	KS
MERCY HOSPITAL	170075	KS
STORMONT-VAIL HEALTHCARE	170086	KS
COFFEY COUNTY HOSPITAL	170094	KS
NEWTON MEDICAL CENTER	170103	KS
SHAWNEE MISSION MEDICAL CENTER	170104	KS
MEMORIAL HOSPITAL INC	170105	KS
MIAMI COUNTY MEDICAL CENTER	170109	KS
BOB WILSON MEMORIAL GRANT COUNTY HOSPITAL	170110	KS
LABETTE HEALTH	170120	KS
VIA CHRISTI HOSPITAL-WICHITA	170122	KS
WESLEY MEDICAL CENTER	170123	KS
CUSHING MEMORIAL HOSPITAL	170133	KS
LAWRENCE MEMORIAL HOSPITAL	170137	KS
MERCY REGIONAL HEALTH CENTER	170142	KS
COFFEYVILLE REGIONAL MEDICAL CENTER	170145	KS
PROVIDENCE MEDICAL CENTER	170146	KS
SOUTH CENTRAL KS MED CENTER	170150	KS

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$6012.00	\$8836.00	\$8294.00
\$7704.00	\$8836.00	\$8294.00
\$6597.00	\$8836.00	\$8294.00
\$4631.00	\$8836.00	\$8294.00
\$8401.00	\$8836.00	\$8294.00
\$5589.00	\$8836.00	\$8294.00
\$8835.00	\$8836.00	\$8294.00
\$7875.00	\$8836.00	\$8294.00
\$5972.00	\$8836.00	\$8294.00
\$6746.00	\$8836.00	\$8294.00
\$5478.00	\$8836.00	\$8294.00
\$8306.00	\$8836.00	\$8294.00
\$9106.00	\$8836.00	\$8294.00
\$10229.00	\$8836.00	\$8294.00
\$5891.00	\$8836.00	\$8294.00
\$7927.00	\$8836.00	\$8294.00
\$8004.00	\$8836.00	\$8294.00
\$7519.00	\$8836.00	\$8294.00
\$8595.00	\$8836.00	\$8294.00
\$6721.00	\$8836.00	\$8294.00

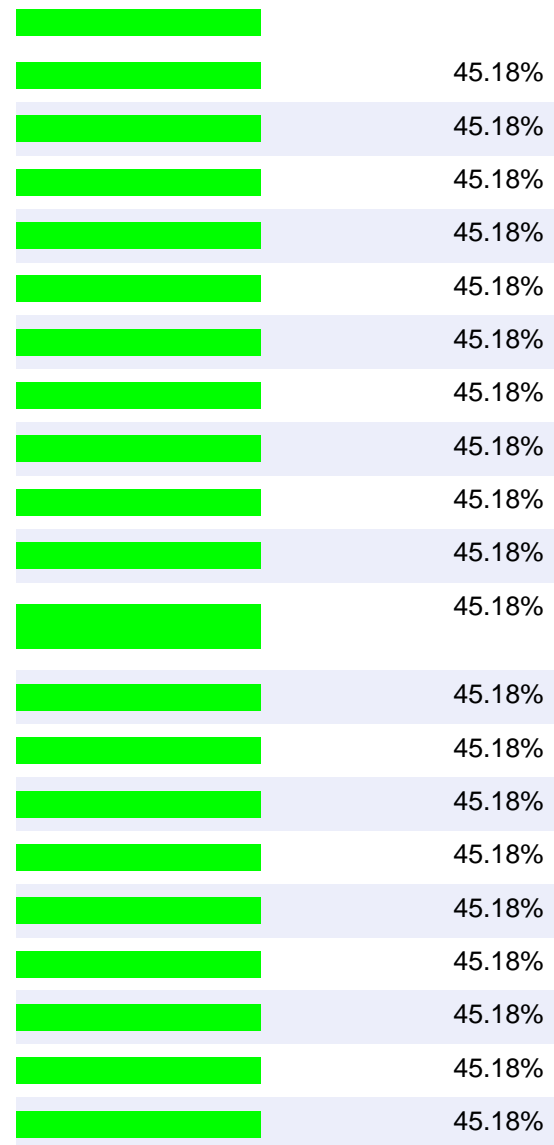
IP-Acute

Based on Spending Breakdown by Claim

	44.54%		47.82%
	49.04%		47.82%
	46.04%		47.82%
	52.3%		47.82%
	46.85%		47.82%
	47.86%		47.82%
	49.64%		47.82%
	42.91%		47.82%
	49.92%		47.82%
	39.07%		47.82%
	48.3%		47.82%
	49.14%		47.82%
	46.59%		47.82%
	46.18%		47.82%
	45.66%		47.82%
	46.67%		47.82%
	48.11%		47.82%
	49.89%		47.82%
	43.61%		47.82%
	43.28%		47.82%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

MORTON COUNTY HOSPITAL	170166	KS
WESTERN PLAINS MEDICAL COMPLEX	170175	KS
OVERLAND PARK REG MED CTR	170176	KS
MENORAH MEDICAL CENTER	170182	KS
KANSAS SURGERY & RECOVERY CENTER	170183	KS
SAINT LUKE'S SOUTH HOSPITAL	170185	KS
KANSAS HEART HOSPITAL	170186	KS
SALINA SURGICAL HOSPITAL	170187	KS
KANSAS CITY ORTHOPAEDIC INSTITUTE	170188	KS
MANHATTAN SURGICAL HOSPITAL LLC	170190	KS
GREAT BEND REGIONAL HOSPITAL	170191	KS
DOCTORS HOSPITAL LLC	170194	KS
HEARTLAND SURGICAL SPEC HOSPITAL	170195	KS
KANSAS SPINE HOSPITAL LLC	170196	KS
KANSAS MEDICAL CENTER LLC	170197	KS
SUMMIT SURGICAL LLC	170198	KS
MINIMALLY INVASIVE SURGERY HOSPITAL	170199	KS
VIA CHRISTI HOSPITAL WICHITA ST TERESA INC	170200	KS
ST ELIZABETH FT THOMAS	180001	KY
WHITESBURG APPALACHIAN REGIONAL HEALTHCARE	180002	KY
MUHLENBERG COMMUNITY HOSPITAL	180004	KY

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





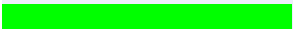
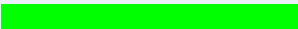
















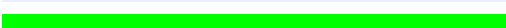
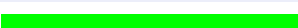
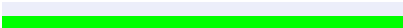
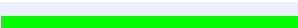
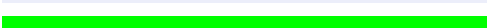
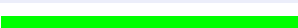
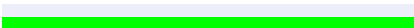
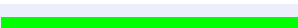
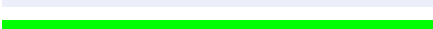
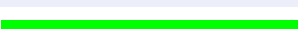
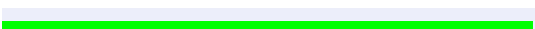
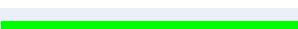
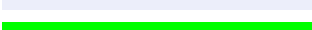
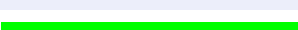
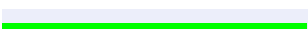
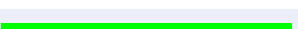




IP-Acute

Based on Spending Breakdown by Claim

\$5498.00	\$8836.00	\$8294.00
\$7007.00	\$8836.00	\$8294.00
\$8333.00	\$8836.00	\$8294.00
\$7665.00	\$8836.00	\$8294.00
\$11916.00	\$8836.00	\$8294.00
\$7698.00	\$8836.00	\$8294.00
\$15077.00	\$8836.00	\$8294.00
\$11145.00	\$8836.00	\$8294.00
\$11770.00	\$8836.00	\$8294.00
\$10778.00	\$8836.00	\$8294.00
\$7744.00	\$8836.00	\$8294.00
\$14791.00	\$8836.00	\$8294.00
\$14761.00	\$8836.00	\$8294.00
\$16545.00	\$8836.00	\$8294.00
\$11956.00	\$8836.00	\$8294.00
\$11317.00	\$8836.00	\$8294.00
\$10657.00	\$8836.00	\$8294.00
\$6881.00	\$8836.00	\$8294.00
\$6961.00	\$8020.00	\$8294.00
\$5193.00	\$8020.00	\$8294.00
\$6019.00	\$8020.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	50.41%		47.82%
	48.75%		47.82%
	41.19%		47.82%
	41.52%		47.82%
	65.4%		47.82%
	47.48%		47.82%
	69.46%		47.82%
	62.83%		47.82%
	62.32%		47.82%
	63.28%		47.82%
	43.17%		47.82%
	71.48%		47.82%
	57.07%		47.82%
	68.91%		47.82%
	58.58%		47.82%
	61.36%		47.82%
	75.41%		47.82%
	44.04%		47.82%
	43.29%		46.76%
	44.1%		46.76%
	48.78%		46.76%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

HIGHLANDS REGIONAL MEDICAL CENTER	180005	KY
KING'S DAUGHTERS' MEDICAL CENTER	180009	KY
SAINT JOSEPH HOSPITAL	180010	KY
SAINT JOSEPH HOSPITAL LONDON	180011	KY
HARDIN MEMORIAL HOSPITAL	180012	KY
THE MEDICAL CENTER AT BOWLING GREEN	180013	KY
JEWISH HOSPITAL - SHELBYVILLE	180016	KY
T. J. SAMSON COMMUNITY HOSPITAL	180017	KY
ST. CLAIRE REGIONAL MEDICAL CENTER	180018	KY
MEADOWVIEW REGIONAL MEDICAL CENTER	180019	KY
MIDDLESBORO APPALACHIAN REGIONAL HEALTHCARE HOSPITAL	180020	KY
PINEVILLE COMMUNITY HOSPITAL	180021	KY
SPRING VIEW HOSPITAL	180024	KY
FLAGET MEMORIAL HOSPITAL	180025	KY
MURRAY-CALLOWAY COUNTY HOSPITAL	180027	KY
HAZARD ARH REGIONAL MEDICAL CENTER	180029	KY
ST. ELIZABETH EDGEWOOD	180035	KY
OUR LADY OF BELLEFONTE HOSPITAL	180036	KY
OWENSBORO MEDICAL HEALTH SYSTEM	180038	KY
JEWISH HOSPITAL & ST MARY'S HEALTHCARE	180040	KY
MEMORIAL HOSPITAL	180043	KY

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





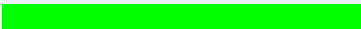
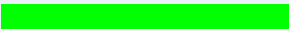
































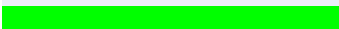
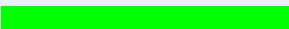


IP-Acute

Based on Spending Breakdown by Claim

\$6178.00	\$8020.00	\$8294.00
\$8545.00	\$8020.00	\$8294.00
\$10104.00	\$8020.00	\$8294.00
\$8523.00	\$8020.00	\$8294.00
\$7343.00	\$8020.00	\$8294.00
\$7897.00	\$8020.00	\$8294.00
\$7783.00	\$8020.00	\$8294.00
\$7617.00	\$8020.00	\$8294.00
\$6526.00	\$8020.00	\$8294.00
\$7082.00	\$8020.00	\$8294.00
\$5426.00	\$8020.00	\$8294.00
\$5182.00	\$8020.00	\$8294.00
\$5690.00	\$8020.00	\$8294.00
\$7967.00	\$8020.00	\$8294.00
\$6444.00	\$8020.00	\$8294.00
\$6772.00	\$8020.00	\$8294.00
\$8569.00	\$8020.00	\$8294.00
\$7320.00	\$8020.00	\$8294.00
\$9122.00	\$8020.00	\$8294.00
\$9346.00	\$8020.00	\$8294.00
\$5992.00	\$8020.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	44.29%		46.76%
	49.01%		46.76%
	50.91%		46.76%
	51.3%		46.76%
	43.69%		46.76%
	44.98%		46.76%
	37.33%		46.76%
	45.03%		46.76%
	46.1%		46.76%
	51.28%		46.76%
	43.17%		46.76%
	48.05%		46.76%
	38.55%		46.76%
	45.85%		46.76%
	47.11%		46.76%
	45.79%		46.76%
	47.3%		46.76%
	46.02%		46.76%
	53.14%		46.76%
	47.98%		46.76%
	42.8%		46.76%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

PIKEVILLE MEDICAL CENTER	180044	KY
ST ELIZABETH FLORENCE	180045	KY
BOURBON COMMUNITY HOSPITAL	180046	KY
EPHRAIM MCDOWELL REGIONAL MEDICAL CENTER	180048	KY
PATTIE A CLAY REGIONAL MEDICAL CENTER	180049	KY
HARLAN APPALACHIAN REGIONAL HEALTHCARE HOSPITAL	180050	KY
JENNIE STUART MEDICAL CENTER	180051	KY
FLEMING COUNTY HOSPITAL	180053	KY
METHODIST HOSPITAL	180056	KY
SAINT JOSEPH MOUNT STERLING	180064	KY
LOGAN MEMORIAL HOSPITAL	180066	KY
UNIVERSITY OF KENTUCKY HOSPITAL	180067	KY
WILLIAMSON APPALACHIAN REGIONAL HOSPITAL	180069	KY
TWIN LAKES REGIONAL MEDICAL CENTER	180070	KY
PAUL B. HALL REGIONAL MEDICAL CENTER	180078	KY
HARRISON MEMORIAL HOSPITAL	180079	KY
BAPTIST REGIONAL MEDICAL CENTER	180080	KY
TAYLOR REGIONAL HOSPITAL	180087	KY
NORTON HOSPITALS, INC	180088	KY
CLARK REGIONAL MEDICAL CENTER	180092	KY

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





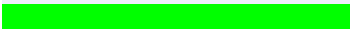
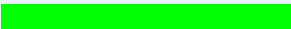


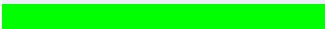
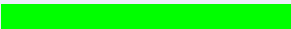


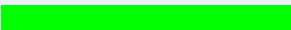




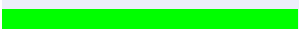
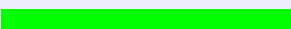










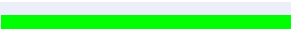

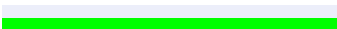
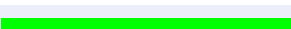
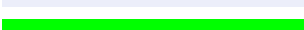
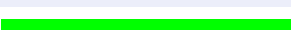
IP-Acute

Based on Spending Breakdown by Claim

\$8807.00	\$8020.00	\$8294.00
\$7480.00	\$8020.00	\$8294.00
\$5329.00	\$8020.00	\$8294.00
\$7643.00	\$8020.00	\$8294.00
\$8121.00	\$8020.00	\$8294.00
\$5251.00	\$8020.00	\$8294.00
\$6855.00	\$8020.00	\$8294.00
\$5463.00	\$8020.00	\$8294.00
\$6144.00	\$8020.00	\$8294.00
\$7473.00	\$8020.00	\$8294.00
\$5834.00	\$8020.00	\$8294.00
\$9889.00	\$8020.00	\$8294.00
\$5125.00	\$8020.00	\$8294.00
\$6693.00	\$8020.00	\$8294.00
\$6000.00	\$8020.00	\$8294.00
\$5975.00	\$8020.00	\$8294.00
\$6566.00	\$8020.00	\$8294.00
\$6794.00	\$8020.00	\$8294.00
\$9247.00	\$8020.00	\$8294.00
\$6253.00	\$8020.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	50.35%		46.76%
	42.58%		46.76%
	49.37%		46.76%
	46.75%		46.76%
	46%		46.76%
	43.43%		46.76%
	41.87%		46.76%
	40.31%		46.76%
	41.61%		46.76%
	44.11%		46.76%
	41.99%		46.76%
	47.96%		46.76%
	48.4%		46.76%
	42.04%		46.76%
	42.29%		46.76%
	40.82%		46.76%
	42.74%		46.76%
	41.71%		46.76%
	47.47%		46.76%
	42.93%		46.76%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

REGIONAL MEDICAL CENTER OF HOPKINS COUNTY	180093	KY
CRITTENDEN HEALTH SYSTEMS	180095	KY
GEORGETOWN COMMUNITY HOSPITAL	180101	KY
LOURDES HOSPITAL	180102	KY
CENTRAL BAPTIST HOSPITAL	180103	KY
WESTERN BAPTIST HOSPITAL	180104	KY
MONROE COUNTY MEDICAL CENTER	180105	KY
CLINTON COUNTY HOSPITAL, INC	180106	KY
ROCKCASTLE REG HOSPITAL & RESPIRATORY CARE CTR	180115	KY
JACKSON PURCHASE MEDICAL CENTER	180116	KY
PARKWAY REGIONAL HOSPITAL	180117	KY
GREENVIEW REGIONAL HOSPITAL	180124	KY
FRANKFORT REGIONAL MEDICAL CENTER	180127	KY
THREE RIVERS MEDICAL CENTER	180128	KY
BAPTIST HOSPITAL EAST	180130	KY
LAKE CUMBERLAND REGIONAL HOSPITAL	180132	KY
BAPTIST HOSPITAL NORTHEAST	180138	KY
KENTUCKY RIVER MEDICAL CENTER	180139	KY
UNIVERSITY OF LOUISVILLE HOSPITAL	180141	KY
SAINT JOSEPH EAST	180143	KY

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient









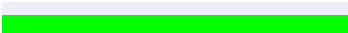
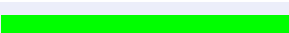
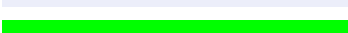
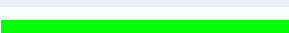
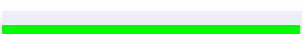
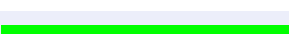
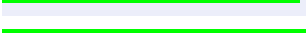
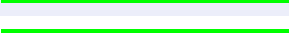
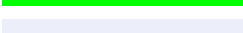
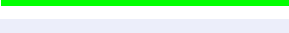


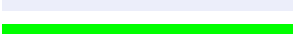
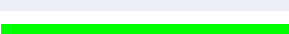
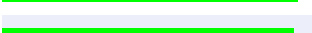
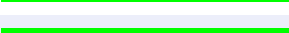
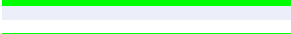
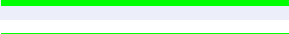


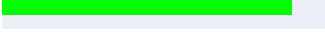
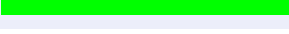










IP-Acute

Based on Spending Breakdown by Claim

\$8033.00	\$8020.00	\$8294.00
\$5412.00	\$8020.00	\$8294.00
\$6705.00	\$8020.00	\$8294.00
\$8344.00	\$8020.00	\$8294.00
\$9231.00	\$8020.00	\$8294.00
\$8268.00	\$8020.00	\$8294.00
\$5099.00	\$8020.00	\$8294.00
\$4638.00	\$8020.00	\$8294.00
\$4668.00	\$8020.00	\$8294.00
\$7060.00	\$8020.00	\$8294.00
\$5068.00	\$8020.00	\$8294.00
\$7783.00	\$8020.00	\$8294.00
\$6894.00	\$8020.00	\$8294.00
\$5413.00	\$8020.00	\$8294.00
\$8909.00	\$8020.00	\$8294.00
\$7181.00	\$8020.00	\$8294.00
\$6457.00	\$8020.00	\$8294.00
\$5251.00	\$8020.00	\$8294.00
\$8180.00	\$8020.00	\$8294.00
\$8608.00	\$8020.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	47.36%		46.76%
	43.14%		46.76%
	46.08%		46.76%
	48.63%		46.76%
	49.12%		46.76%
	49.17%		46.76%
	42.23%		46.76%
	43.07%		46.76%
	34.21%		46.76%
	41.95%		46.76%
	41.43%		46.76%
	43.81%		46.76%
	41.15%		46.76%
	45.71%		46.76%
	45.55%		46.76%
	46.56%		46.76%
	43.5%		46.76%
	42.63%		46.76%
	44.84%		46.76%
	49.03%		46.76%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

WESTLAKE REGIONAL HOSPITAL	180149	KY
LSU BOGALUSA MEDICAL CENTER	190001	LA
LAFAYETTE GENERAL MEDICAL CENTER	190002	LA
DAUTERIVE HOSPITAL	190003	LA
THIBODAUX REGIONAL MEDICAL CENTER	190004	LA
MEDICAL CENTER OF LOUISIANA	190005	LA
UNIVERSITY MEDICAL CENTER	190006	LA
NATCHITOCHE REGIONAL MEDICAL CENTER	190007	LA
TERREBONNE GENERAL MEDICAL CENTER	190008	LA
HUEY P LONG MEDICAL CENTER	190009	LA
E A CONWAY MEDICAL CENTER	190011	LA
WEST CALCASIEU CAMERON HOSPITAL	190013	LA
TECHE REGIONAL MEDICAL CENTER	190014	LA
NORTH OAKS MEDICAL CENTER, LLC	190015	LA
OPELOUSAS GENERAL HEALTH SYSTEM	190017	LA
BEAUREGARD MEMORIAL HOSPITAL	190050	LA
CHRISTUS ST FRANCES CABRINI HOSPITAL	190019	LA
LANE REGIONAL MEDICAL CENTER	190020	LA
SAVOY MEDICAL CENTER	190025	LA
RAPIDES REGIONAL MEDICAL CENTER	190026	LA
CHRISTUS ST PATRICK HOSPITAL	190027	LA
ABBEVILLE GENERAL HOSPITAL	190034	LA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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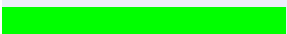
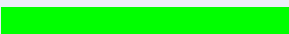


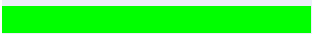
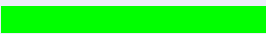














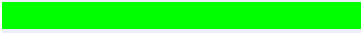
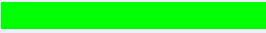






















IP-Acute

Based on Spending Breakdown by Claim

	\$5332.00	\$8020.00	\$8294.00
	\$5523.00	\$8143.00	\$8294.00
	\$8137.00	\$8143.00	\$8294.00
	\$8458.00	\$8143.00	\$8294.00
	\$8368.00	\$8143.00	\$8294.00
	\$8555.00	\$8143.00	\$8294.00
	\$6830.00	\$8143.00	\$8294.00
	\$6233.00	\$8143.00	\$8294.00
	\$8848.00	\$8143.00	\$8294.00
	\$5388.00	\$8143.00	\$8294.00
	\$5185.00	\$8143.00	\$8294.00
	\$7628.00	\$8143.00	\$8294.00
	\$6286.00	\$8143.00	\$8294.00
	\$7917.00	\$8143.00	\$8294.00
	\$8782.00	\$8143.00	\$8294.00
	\$6323.00	\$8143.00	\$8294.00
	\$8706.00	\$8143.00	\$8294.00
	\$7120.00	\$8143.00	\$8294.00
	\$6113.00	\$8143.00	\$8294.00
	\$8437.00	\$8143.00	\$8294.00
	\$8758.00	\$8143.00	\$8294.00
	\$6338.00	\$8143.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	40.33%		46.76%
	30.15%		42.88%
	43.8%		42.88%
	42.36%		42.88%
	42.85%		42.88%
	51.23%		42.88%
	57.97%		42.88%
	32.9%		42.88%
	46.67%		42.88%
	51.57%		42.88%
	50.99%		42.88%
	42.05%		42.88%
	40.08%		42.88%
	39.21%		42.88%
	42.51%		42.88%
	39.8%		42.88%
	45.37%		42.88%
	37.43%		42.88%
	33.75%		42.88%
	43.41%		42.88%
	44.35%		42.88%
	37.37%		42.88%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

OCHSNER MEDICAL CENTER NEW ORLEANS	190036	LA
WEST JEFFERSON MEDICAL CENTER	190039	LA
SLIDELL MEMORIAL HOSPITAL	190040	LA
CHRISTUS SCHUMPERT HEALTH SYSTEM	190041	LA
AMERICAN LEGION HOSPITAL	190044	LA
ST TAMMANY PARISH HOSPITAL	190045	LA
TOURO INFIRMARY	190046	LA
JENNINGS AMERICAN LEGION HOSPITAL	190053	LA
IBERIA MEDICAL CENTER	190054	LA
LAKE CHARLES MEMORIAL HOSPITAL	190060	LA
OUR LADY OF THE LAKE REGIONAL MEDICAL CENTER	190064	LA
BATON ROUGE GENERAL MEDICAL CENTER	190065	LA
ST CHARLES PARISH HOSPITAL	190079	LA
WEST CARROLL MEMORIAL HOSPITAL	190081	LA
NORTHERN LOUISIANA MEDICAL CENTER	190086	LA
SPRINGHILL MEDICAL CENTER	190088	LA
WINN PARISH MEDICAL CENTER	190090	LA
LSU HEALTH SCIENCES CENTER - SHREVEPORT	190098	LA
AVOYELLES HOSPITAL	190099	LA
OUR LADY OF LOURDES REGIONAL MEDICAL	190102	LA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$9626.00	\$8143.00	\$8294.00
\$8198.00	\$8143.00	\$8294.00
\$8295.00	\$8143.00	\$8294.00
\$8193.00	\$8143.00	\$8294.00
\$6263.00	\$8143.00	\$8294.00
\$8095.00	\$8143.00	\$8294.00
\$8359.00	\$8143.00	\$8294.00
\$6093.00	\$8143.00	\$8294.00
\$7046.00	\$8143.00	\$8294.00
\$8198.00	\$8143.00	\$8294.00
\$9613.00	\$8143.00	\$8294.00
\$8644.00	\$8143.00	\$8294.00
\$5800.00	\$8143.00	\$8294.00
\$4585.00	\$8143.00	\$8294.00
\$6648.00	\$8143.00	\$8294.00
\$5347.00	\$8143.00	\$8294.00
\$5036.00	\$8143.00	\$8294.00
\$8246.00	\$8143.00	\$8294.00
\$5351.00	\$8143.00	\$8294.00
\$8653.00	\$8143.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	49.18%		42.88%
	40.18%		42.88%
	42.6%		42.88%
	41.02%		42.88%
	37.84%		42.88%
	42.44%		42.88%
	41.75%		42.88%
	38.97%		42.88%
	36.87%		42.88%
	44.89%		42.88%
	45.49%		42.88%
	41.27%		42.88%
	35.91%		42.88%
	38.3%		42.88%
	35.62%		42.88%
	34.94%		42.88%
	28.86%		42.88%
	46.75%		42.88%
	37.51%		42.88%
	42.47%		42.88%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

CENTER, INC		
OAKDALE COMMUNITY HOSPITAL	190106	LA
WILLIS KNIGHTON MEDICAL CENTER	190111	LA
HOMER MEMORIAL HOSPITAL	190114	LA
MOREHOUSE GENERAL HOSPITAL	190116	LA
DESOTO REGIONAL HEALTH SYSTEM	190118	LA
EARL K LONG MEDICAL CENTER	190122	LA
ST FRANCIS MEDICAL CENTER	190125	LA
WOMAN'S HOSPITAL	190128	LA
ALLEN PARISH HOSPITAL	190133	LA
OCHSNER BAPTIST MEDICAL CENTER LLC	190135	LA
FRANKLIN MEDICAL CENTER	190140	LA
MINDEN MEDICAL CENTER	190144	LA
LASALLE GENERAL HOSPITAL	190145	LA
EAST JEFFERSON GENERAL HOSPITAL	190146	LA
RICHARDSON MEDICAL CENTER	190151	LA
GLENWOOD REGIONAL MEDICAL CENTER	190160	LA
W O MOSS REGIONAL MEDICAL CENTER	190161	LA
BYRD REGIONAL HOSPITAL	190164	LA
MERCY REGIONAL MEDICAL CENTER	190167	LA
RIVER PARISHES HOSPITAL	190175	LA
TULANE MEDICAL CENTER	190176	LA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

	\$6538.00	\$8143.00	\$8294.00
	\$8454.00	\$8143.00	\$8294.00
	\$5700.00	\$8143.00	\$8294.00
	\$5505.00	\$8143.00	\$8294.00
	\$4893.00	\$8143.00	\$8294.00
	\$6641.00	\$8143.00	\$8294.00
	\$8593.00	\$8143.00	\$8294.00
	\$6311.00	\$8143.00	\$8294.00
	\$4611.00	\$8143.00	\$8294.00
	\$7139.00	\$8143.00	\$8294.00
	\$5031.00	\$8143.00	\$8294.00
	\$6154.00	\$8143.00	\$8294.00
	\$5086.00	\$8143.00	\$8294.00
	\$8581.00	\$8143.00	\$8294.00
	\$5448.00	\$8143.00	\$8294.00
	\$7259.00	\$8143.00	\$8294.00
	\$6145.00	\$8143.00	\$8294.00
	\$5817.00	\$8143.00	\$8294.00
	\$5986.00	\$8143.00	\$8294.00
	\$6750.00	\$8143.00	\$8294.00
	\$9073.00	\$8143.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.39%		42.88%
	41.83%		42.88%
	30.62%		42.88%
	33.46%		42.88%
	35.53%		42.88%
	55.26%		42.88%
	42.49%		42.88%
	63.69%		42.88%
	52.28%		42.88%
	48.21%		42.88%
	35.38%		42.88%
	36.69%		42.88%
	38.46%		42.88%
	43.54%		42.88%
	38.15%		42.88%
	39.54%		42.88%
	66.08%		42.88%
	36.98%		42.88%
	37.71%		42.88%
	37.3%		42.88%
	49.84%		42.88%

IP-Acute

Based on Spending Breakdown by Claim

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IP-Acute

Based on Spending Breakdown by Claim

LAKEVIEW REGIONAL MEDICAL CENTER	190177	LA
LEONARD J. CHABERT MEDICAL CENTER	190183	LA
CITIZENS MEDICAL CENTER	190184	LA
CALDWELL MEMORIAL HOSPITAL	190190	LA
WOMEN AND CHILDREN'S HOSPITAL AT LAKE CHARLES	190201	LA
OCHSNER MEDICAL CENTER-BATON ROUGE	190202	LA
OCHSNER MEDICAL CENTER - NORTHSORE, LLC	190204	LA
THE REGIONAL MEDICAL CENTER OF ACADIANA	190205	LA
EAST CARROLL PARISH HOSPITAL	190208	LA
SABINE MEDICAL CENTER	190218	LA
WILLIS KNIGHTON BOSSIER HEALTH CENTER	190236	LA
PHYSICIANS MEDICAL CENTER	190241	LA
ST ELIZABETH HOSPITAL	190242	LA
MONROE SURGICAL HOSPITAL	190245	LA
P & S SURGICAL HOSPITAL	190246	LA
LOUISIANA MEDICAL CENTER AND HEART HOSPITAL, LLC	190250	LA
GREEN CLINIC SURGICAL HOSPITAL	190257	LA
LAFAYETTE SURGICAL SPECIALTY HOSPITAL	190259	LA
HEART HOSPITAL OF LAFAYETTE	190263	LA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$8837.00	\$8143.00	\$8294.00
\$6630.00	\$8143.00	\$8294.00
\$4907.00	\$8143.00	\$8294.00
\$4803.00	\$8143.00	\$8294.00
\$7399.00	\$8143.00	\$8294.00
\$8412.00	\$8143.00	\$8294.00
\$7788.00	\$8143.00	\$8294.00
\$9605.00	\$8143.00	\$8294.00
\$4419.00	\$8143.00	\$8294.00
\$4739.00	\$8143.00	\$8294.00
\$7298.00	\$8143.00	\$8294.00
\$15432.00	\$8143.00	\$8294.00
\$6335.00	\$8143.00	\$8294.00
\$9266.00	\$8143.00	\$8294.00
\$13994.00	\$8143.00	\$8294.00
\$11358.00	\$8143.00	\$8294.00
\$7316.00	\$8143.00	\$8294.00
\$13873.00	\$8143.00	\$8294.00
\$13018.00	\$8143.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.23%		42.88%
	49.64%		42.88%
	44.29%		42.88%
	45.62%		42.88%
	54.01%		42.88%
	41.31%		42.88%
	42.23%		42.88%
	47.54%		42.88%
	41.44%		42.88%
	34.01%		42.88%
	35.71%		42.88%
	71.68%		42.88%
	36.59%		42.88%
	58.15%		42.88%
	58.82%		42.88%
	53.02%		42.88%
	46.85%		42.88%
	60.61%		42.88%
	59.86%		42.88%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

THE NEUROMEDICAL CENTER HOSPITAL	190266	LA
FAIRWAY MEDICAL CENTER	190267	LA
SOUTHERN SURGICAL HOSPITAL	190270	LA
OCHSNER MEDICAL CENTER-KENNER LLC	190274	LA
SPECIALISTS HOSPITAL SHREVEPORT	190278	LA
DOCTORS HOSPITAL AT DEER CREEK LLC	190297	LA
CENTRAL LOUISIANA SURGICAL HOSPITAL	190298	LA
CYPRESS POINTE SURGICAL HOSPITAL	190303	LA
ST JOSEPH HOSPITAL	200001	ME
MILES MEMORIAL HOSPITAL (LINCOLN COUNTY HEALTHCARE	200002	ME
MERCY HOSPITAL	200008	ME
MAINE MEDICAL CENTER	200009	ME
AROOSTOOK MEDICAL CENTER,THE	200018	ME
SOUTHERN MAINE MEDICAL CENTER	200019	ME
YORK HOSPITAL	200020	ME
MID COAST HOSPITAL	200021	ME
CENTRAL MAINE MEDICAL CENTER	200024	ME
PARKVIEW ADVENTIST MEDICAL CENTER	200025	ME
CARY MEDICAL CENTER	200031	ME
EASTERN MAINE MEDICAL CENTER	200033	ME
ST MARYS REGIONAL MEDICAL CENTER	200034	ME

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





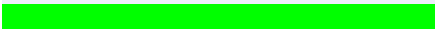
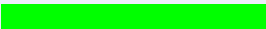




























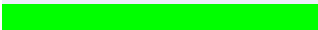
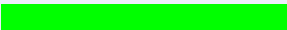


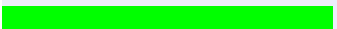
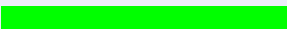


IP-Acute

Based on Spending Breakdown by Claim

\$16055.00	\$8143.00	\$8294.00
\$10165.00	\$8143.00	\$8294.00
\$12108.00	\$8143.00	\$8294.00
\$9052.00	\$8143.00	\$8294.00
\$13978.00	\$8143.00	\$8294.00
\$6553.00	\$8143.00	\$8294.00
\$12106.00	\$8143.00	\$8294.00
\$12705.00	\$8143.00	\$8294.00
\$6766.00	\$7914.00	\$8294.00
\$6752.00	\$7914.00	\$8294.00
\$8099.00	\$7914.00	\$8294.00
\$9813.00	\$7914.00	\$8294.00
\$7908.00	\$7914.00	\$8294.00
\$7103.00	\$7914.00	\$8294.00
\$6749.00	\$7914.00	\$8294.00
\$6711.00	\$7914.00	\$8294.00
\$8495.00	\$7914.00	\$8294.00
\$6063.00	\$7914.00	\$8294.00
\$6626.00	\$7914.00	\$8294.00
\$8819.00	\$7914.00	\$8294.00
\$8271.00	\$7914.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	60.33%		42.88%
	52.64%		42.88%
	61.48%		42.88%
	45.35%		42.88%
	60.84%		42.88%
	42.7%		42.88%
	59.36%		42.88%
	46.96%		42.88%
	43.99%		46.4%
	39.26%		46.4%
	44.86%		46.4%
	48.21%		46.4%
	50.34%		46.4%
	42.32%		46.4%
	45.98%		46.4%
	46.59%		46.4%
	49.07%		46.4%
	44.8%		46.4%
	46.88%		46.4%
	47.85%		46.4%
	47.37%		46.4%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

FRANKLIN MEMORIAL HOSPITAL	200037	ME
MAINE GENERAL MEDICAL CENTER	200039	ME
GOODALL HOSPITAL	200040	ME
INLAND HOSPITAL	200041	ME
MAINE COAST MEMORIAL HOSPITAL	200050	ME
PENOBSCOT BAY MEDICAL CENTER	200063	ME
NORTHERN MAINE MEDICAL CENTER	200052	ME
HEALTHALLIANCE HOSPITALS, INC	220001	MA
MOUNT AUBURN HOSPITAL	220002	MA
STURDY MEMORIAL HOSPITAL	220008	MA
LAWRENCE GENERAL HOSPITAL	220010	MA
CAMBRIDGE HEALTH ALLIANCE	220011	MA
CAPE COD HOSPITAL	220012	MA
COOLEY DICKINSON HOSPITAL INC,THE	220015	MA
BAYSTATE FRANKLIN MEDICAL CENTER	220016	MA
CARNEY HOSPITAL	220017	MA
HARRINGTON MEMORIAL HOSPITAL	220019	MA
SAINT ANNE'S HOSPITAL	220020	MA
HOLYOKE MEDICAL CENTER	220024	MA
ANNA JAKES HOSPITAL	220029	MA
UMASS MEMORIAL HEALTHCARE WING MEMORIAL HOSPITAL	220030	MA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





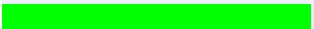
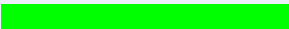
















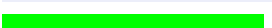
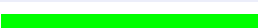
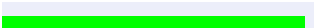
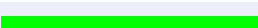
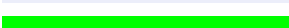
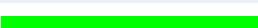
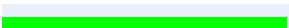
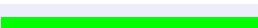
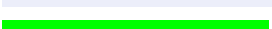
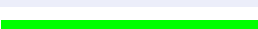
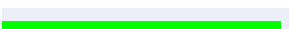
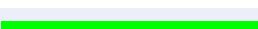
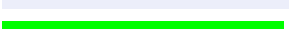
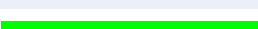
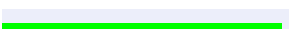
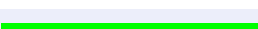
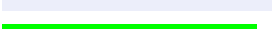
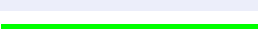


IP-Acute

Based on Spending Breakdown by Claim

	\$6680.00	\$7914.00	\$8294.00
	\$7472.00	\$7914.00	\$8294.00
	\$6557.00	\$7914.00	\$8294.00
	\$6625.00	\$7914.00	\$8294.00
	\$6569.00	\$7914.00	\$8294.00
	\$6140.00	\$7914.00	\$8294.00
	\$6002.00	\$7914.00	\$8294.00
	\$7161.00	\$7556.00	\$8294.00
	\$7689.00	\$7556.00	\$8294.00
	\$6710.00	\$7556.00	\$8294.00
	\$6760.00	\$7556.00	\$8294.00
	\$6153.00	\$7556.00	\$8294.00
	\$8071.00	\$7556.00	\$8294.00
	\$6607.00	\$7556.00	\$8294.00
	\$6366.00	\$7556.00	\$8294.00
	\$6460.00	\$7556.00	\$8294.00
	\$5989.00	\$7556.00	\$8294.00
	\$6432.00	\$7556.00	\$8294.00
	\$6551.00	\$7556.00	\$8294.00
	\$6002.00	\$7556.00	\$8294.00
	\$5773.00	\$7556.00	\$8294.00

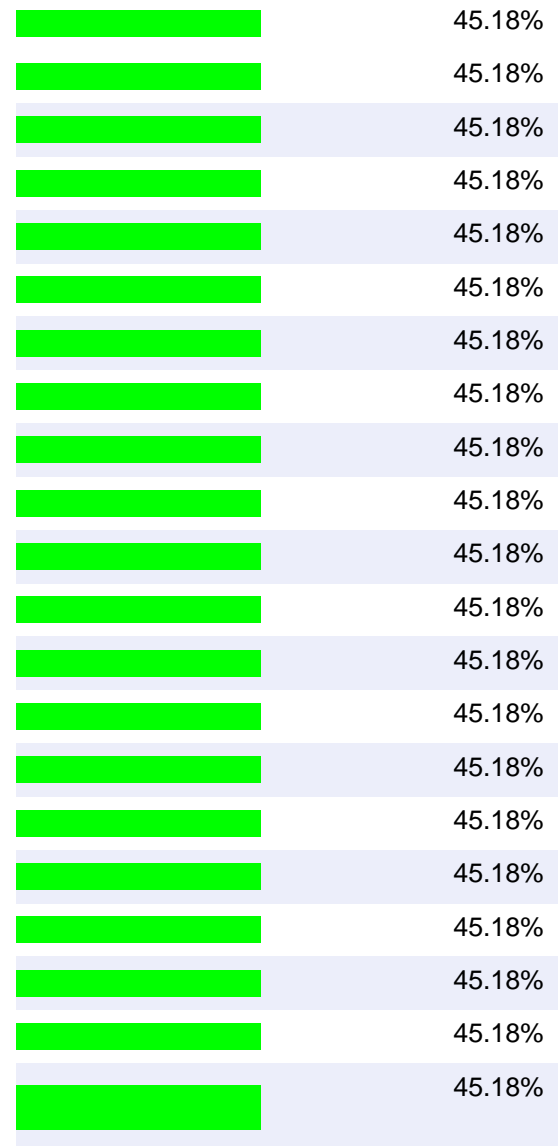
IP-Acute

Based on Spending Breakdown by Claim

	44.1%		46.4%
	45.04%		46.4%
	43.8%		46.4%
	42.98%		46.4%
	44.1%		46.4%
	44.81%		46.4%
	49.25%		46.4%
	38.66%		41.65%
	39.69%		41.65%
	37.13%		41.65%
	37.74%		41.65%
	37.11%		41.65%
	42.9%		41.65%
	41.13%		41.65%
	40.46%		41.65%
	37.88%		41.65%
	39.58%		41.65%
	39.98%		41.65%
	39.73%		41.65%
	36.14%		41.65%
	37.7%		41.65%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

BOSTON MEDICAL CENTER	220031	MA
BEVERLY HOSPITAL	220033	MA
NORTH SHORE MEDICAL CENTER	220035	MA
ST ELIZABETH'S MEDICAL CENTER	220036	MA
BERKSHIRE MEDICAL CENTER	220046	MA
UMASS MEMORIAL HEALTHCARE-MARLBOROUGH HOSPITAL	220049	MA
BAYSTATE MARY LANE HOSPITAL	220050	MA
NORTH ADAMS REGIONAL HOSPITAL	220051	MA
SIGNATURE HEALTHCARE BROCKTON HOSPITAL	220052	MA
UMASS MEMORIAL HEALTHCARE-CLINTON HOSPITAL	220058	MA
JORDAN HOSPITAL INC	220060	MA
ADCARE HOSPITAL OF WORCESTER INC	220062	MA
LOWELL GENERAL HOSPITAL	220063	MA
NOBLE HOSPITAL	220065	MA
MERCY MEDICAL CENTER	220066	MA
QUINCY MEDICAL CENTER	220067	MA
HALLMARK HEALTH INC	220070	MA
MASSACHUSETTS GENERAL HOSPITAL	220071	MA
MORTON HOSPITAL	220073	MA
SOUTHCOAST HOSPITALS GROUP	220074	MA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient

















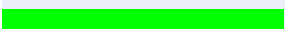
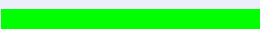


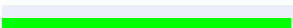
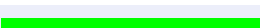
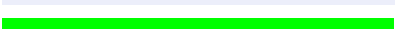
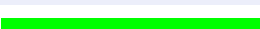
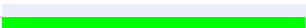
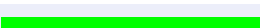
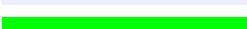
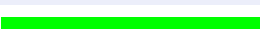
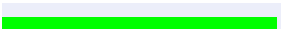
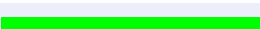
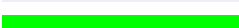
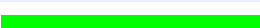
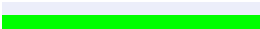
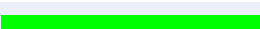
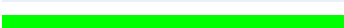
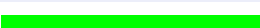
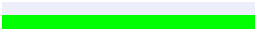
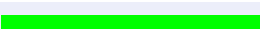
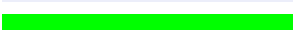
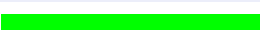
IP-Acute

Based on Spending Breakdown by Claim

\$7913.00	\$7556.00	\$8294.00
\$6333.00	\$7556.00	\$8294.00
\$7602.00	\$7556.00	\$8294.00
\$7766.00	\$7556.00	\$8294.00
\$7668.00	\$7556.00	\$8294.00
\$6108.00	\$7556.00	\$8294.00
\$5878.00	\$7556.00	\$8294.00
\$7823.00	\$7556.00	\$8294.00
\$6625.00	\$7556.00	\$8294.00
\$4935.00	\$7556.00	\$8294.00
\$6831.00	\$7556.00	\$8294.00
\$4446.00	\$7556.00	\$8294.00
\$7132.00	\$7556.00	\$8294.00
\$6064.00	\$7556.00	\$8294.00
\$6815.00	\$7556.00	\$8294.00
\$6417.00	\$7556.00	\$8294.00
\$6040.00	\$7556.00	\$8294.00
\$10209.00	\$7556.00	\$8294.00
\$6262.00	\$7556.00	\$8294.00
\$7102.00	\$7556.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	44.28%		41.65%
	38.29%		41.65%
	42.35%		41.65%
	42.3%		41.65%
	40.51%		41.65%
	35%		41.65%
	39.37%		41.65%
	41.92%		41.65%
	39.96%		41.65%
	32.2%		41.65%
	40.99%		41.65%
	55.58%		41.65%
	42.99%		41.65%
	34.79%		41.65%
	39.02%		41.65%
	33.79%		41.65%
	36.6%		41.65%
	48.93%		41.65%
	36.02%		41.65%
	41.61%		41.65%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

MASSACHUSETTS EYE AND EAR INFIRMARY	220075	MA
BAYSTATE MEDICAL CENTER	220077	MA
HOLY FAMILY HOSPITAL	220080	MA
SAINTS MEDICAL CENTER	220082	MA
BETH ISRAEL DEACONESS HOSPITAL- NEEDHAM	220083	MA
EMERSON HOSPITAL	220084	MA
BETH ISRAEL DEACONESS MEDICAL CENTER	220086	MA
NEW ENGLAND BAPTIST HOSPITAL	220088	MA
MILFORD REGIONAL MEDICAL CENTER	220090	MA
HEYWOOD HOSPITAL	220095	MA
NASHOBA VALLEY MEDICAL CENTER	220098	MA
SOUTH SHORE HOSPITAL	220100	MA
NEWTON-WELLESLEY HOSPITAL	220101	MA
WINCHESTER HOSPITAL	220105	MA
MILTON HOSPITAL INC	220108	MA
BRIGHAM AND WOMEN'S HOSPITAL	220110	MA
GOOD SAMARITAN MEDICAL CENTER	220111	MA
TUFTS MEDICAL CENTER	220116	MA
FAULKNER HOSPITAL	220119	MA
NORWOOD HOSPITAL	220126	MA
FALMOUTH HOSPITAL	220135	MA
UMASS MEMORIAL MEDICAL CENTER/UNIVERSITY	220163	MA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient













































IP-Acute

Based on Spending Breakdown by Claim

	\$7830.00	\$7556.00	\$8294.00
	\$9041.00	\$7556.00	\$8294.00
	\$7018.00	\$7556.00	\$8294.00
	\$7188.00	\$7556.00	\$8294.00
	\$5982.00	\$7556.00	\$8294.00
	\$6525.00	\$7556.00	\$8294.00
	\$9008.00	\$7556.00	\$8294.00
	\$12804.00	\$7556.00	\$8294.00
	\$6251.00	\$7556.00	\$8294.00
	\$6358.00	\$7556.00	\$8294.00
	\$5557.00	\$7556.00	\$8294.00
	\$6726.00	\$7556.00	\$8294.00
	\$7152.00	\$7556.00	\$8294.00
	\$6543.00	\$7556.00	\$8294.00
	\$6649.00	\$7556.00	\$8294.00
	\$11010.00	\$7556.00	\$8294.00
	\$6479.00	\$7556.00	\$8294.00
	\$9284.00	\$7556.00	\$8294.00
	\$5911.00	\$7556.00	\$8294.00
	\$6589.00	\$7556.00	\$8294.00
	\$8163.00	\$7556.00	\$8294.00
	\$8092.00	\$7556.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.43%		41.65%
	43.79%		41.65%
	39.19%		41.65%
	39.85%		41.65%
	35.98%		41.65%
	38.43%		41.65%
	42.89%		41.65%
	53.35%		41.65%
	38.16%		41.65%
	41.06%		41.65%
	33.1%		41.65%
	36.37%		41.65%
	41.53%		41.65%
	39.25%		41.65%
	39.99%		41.65%
	50.73%		41.65%
	38.42%		41.65%
	44.61%		41.65%
	39.89%		41.65%
	38.66%		41.65%
	41.52%		41.65%
	41.82%		41.65%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

CAMPUS

LAHEY CLINIC HOSPITAL	220171	MA
MERRIMACK VALLEY HOSPITAL	220174	MA
METROWEST MEDICAL CENTER	220175	MA
ST VINCENT HOSPITAL	220176	MA
NANTUCKET COTTAGE HOSPITAL	220177	MA
ST MARY MERCY HOSPITAL	230002	MI
SPECTRUM HEALTH ZEELAND COMMUNITY HOSPITAL	230003	MI
MERCY HEALTH PARTNERS, MERCY CAMPUS	230004	MI
PROMEDICA BIXBY HOSPITAL	230005	MI
DOCTORS' HOSPITAL OF MICHIGAN	230013	MI
THREE RIVERS HEALTH	230015	MI
BRONSON METHODIST HOSPITAL	230017	MI
PROVIDENCE HOSP AND MED CTRS	230019	MI
OAKWOOD HOSPITAL AND MEDICAL CENTER	230020	MI
LAKELAND HOSPITAL, ST JOSEPH	230021	MI
COMMUNITY HEALTH CENTER OF BRANCH COUNTY	230022	MI
SINAI-GRACE HOSPITAL	230024	MI
ST JOSEPH MERCY OAKLAND	230029	MI
MIDMICHIGAN MEDICAL CENTER-GRATIOT	230030	MI

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

	\$8468.00	\$7556.00	\$8294.00
	\$6665.00	\$7556.00	\$8294.00
	\$6924.00	\$7556.00	\$8294.00
	\$7358.00	\$7556.00	\$8294.00
	\$5511.00	\$7556.00	\$8294.00
	\$7207.00	\$8284.00	\$8294.00
	\$7566.00	\$8284.00	\$8294.00
	\$9818.00	\$8284.00	\$8294.00
	\$6509.00	\$8284.00	\$8294.00
	\$7052.00	\$8284.00	\$8294.00
	\$5895.00	\$8284.00	\$8294.00
	\$9052.00	\$8284.00	\$8294.00
	\$8180.00	\$8284.00	\$8294.00
	\$8794.00	\$8284.00	\$8294.00
	\$8226.00	\$8284.00	\$8294.00
	\$6767.00	\$8284.00	\$8294.00
	\$7917.00	\$8284.00	\$8294.00
	\$8992.00	\$8284.00	\$8294.00
	\$6825.00	\$8284.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	44.1%		41.65%
	35.64%		41.65%
	38.5%		41.65%
	42.58%		41.65%
	49.53%		41.65%
	38.81%		45.73%
	48.81%		45.73%
	48.78%		45.73%
	45.98%		45.73%
	44.71%		45.73%
	43.02%		45.73%
	50.07%		45.73%
	43.91%		45.73%
	45.15%		45.73%
	48.51%		45.73%
	46.04%		45.73%
	39.04%		45.73%
	45.89%		45.73%
	41.01%		45.73%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

ST JOSEPH MERCY PORT HURON	230031	MI
SPECTRUM HEALTH UNITED	230035	MI
ALPENA REGIONAL MEDICAL CENTER	230036	MI
HILLSDALE COMMUNITY HEALTH CENTER	230037	MI
SPECTRUM HEALTH-BUTTERWORTH CAMPUS	230038	MI
PENNOCK HEALTH SERVICES	230040	MI
MCLAREN BAY REGION	230041	MI
UNIVERSITY OF MICHIGAN HEALTH SYSTEM	230046	MI
HENRY FORD MACOMB HOSPITAL	230047	MI
HENRY FORD HOSPITAL	230053	MI
MARQUETTE GENERAL HOSPITAL	230054	MI
DICKINSON COUNTY HEALTHCARE SYSTEM	230055	MI
MERCY HOSPITAL- GRAYLING	230058	MI
SAINT MARY'S HEALTH CARE	230059	MI
MERCY HEALTH PARTNERS, HACKLEY CAMPUS	230066	MI
SAINT JOSEPH MERCY LIVINGSTON HOSPITAL	230069	MI
COVENANT HEALTHCARE	230070	MI
STRAITH HOSPITAL FOR SPECIAL SURGERY	230071	MI
HOLLAND COMMUNITY HOSPITAL	230072	MI
BRONSON BATTLE CREEK HOSPITAL	230075	MI
ST MARY'S OF MICHIGAN MEDICAL CENTER	230077	MI
COMMUNITY HOSPITAL- WATERVLIET	230078	MI

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient

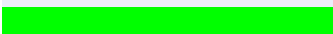
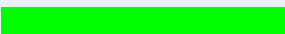


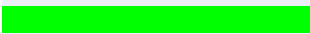
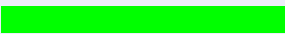














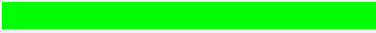
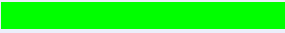






















IP-Acute

Based on Spending Breakdown by Claim

\$7973.00	\$8284.00	\$8294.00
\$6557.00	\$8284.00	\$8294.00
\$8124.00	\$8284.00	\$8294.00
\$6597.00	\$8284.00	\$8294.00
\$9391.00	\$8284.00	\$8294.00
\$6856.00	\$8284.00	\$8294.00
\$9008.00	\$8284.00	\$8294.00
\$9948.00	\$8284.00	\$8294.00
\$8034.00	\$8284.00	\$8294.00
\$8596.00	\$8284.00	\$8294.00
\$10312.00	\$8284.00	\$8294.00
\$7622.00	\$8284.00	\$8294.00
\$6255.00	\$8284.00	\$8294.00
\$8816.00	\$8284.00	\$8294.00
\$7632.00	\$8284.00	\$8294.00
\$6392.00	\$8284.00	\$8294.00
\$8271.00	\$8284.00	\$8294.00
\$7072.00	\$8284.00	\$8294.00
\$7860.00	\$8284.00	\$8294.00
\$7746.00	\$8284.00	\$8294.00
\$9509.00	\$8284.00	\$8294.00
\$6179.00	\$8284.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	47.26%		45.73%
	47.53%		45.73%
	44%		45.73%
	44.78%		45.73%
	48.44%		45.73%
	49.34%		45.73%
	48.58%		45.73%
	50.18%		45.73%
	42.32%		45.73%
	44.87%		45.73%
	53.45%		45.73%
	44.73%		45.73%
	47.26%		45.73%
	46.57%		45.73%
	45.86%		45.73%
	42.05%		45.73%
	47.09%		45.73%
	29.14%		45.73%
	46.8%		45.73%
	43.52%		45.73%
	47.4%		45.73%
	46.85%		45.73%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

CENTRAL MICHIGAN COMMUNITY HOSPITAL	230080	MI
MERCY HOSPITAL - CADILLAC NORTH	230081	MI
SOUTH HAVEN COMMUNITY HOSPITAL	230085	MI
BEAUMONT HOSPITAL, GROSSE POINTE	230089	MI
ALLEGIANCE HEALTH	230092	MI
MECOSTA COUNTY MEDICAL CENTER	230093	MI
WEST BRANCH REGIONAL MEDICAL CENTER	230095	MI
STURGIS HOSPITAL	230096	MI
MUNSON MEDICAL CENTER	230097	MI
MERCY MEMORIAL HOSPITAL	230099	MI
ST JOSEPH HEALTH SYSTEM - TAWAS	230100	MI
HARPER UNIVERSITY HOSPITAL	230104	MI
NORTHERN MICHIGAN HOSPITAL	230105	MI
SPECTRUM HEALTH GERBER MEMORIAL	230106	MI
PORTAGE HEALTH HOSPITAL	230108	MI
MEMORIAL MEDICAL CENTER OF WEST MICHIGAN	230110	MI
BORGESS MEDICAL CENTER	230117	MI
HURON MEDICAL CENTER	230118	MI
MEMORIAL HEALTHCARE CENTER	230121	MI
WILLIAM BEAUMONT HOSPITAL ROYAL OAK	230130	MI
HURLEY MEDICAL CENTER	230132	MI

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$6502.00	\$8284.00	\$8294.00
\$6972.00	\$8284.00	\$8294.00
\$7404.00	\$8284.00	\$8294.00
\$7580.00	\$8284.00	\$8294.00
\$7939.00	\$8284.00	\$8294.00
\$7207.00	\$8284.00	\$8294.00
\$7080.00	\$8284.00	\$8294.00
\$6396.00	\$8284.00	\$8294.00
\$8959.00	\$8284.00	\$8294.00
\$6777.00	\$8284.00	\$8294.00
\$6959.00	\$8284.00	\$8294.00
\$8737.00	\$8284.00	\$8294.00
\$9156.00	\$8284.00	\$8294.00
\$7066.00	\$8284.00	\$8294.00
\$7227.00	\$8284.00	\$8294.00
\$7489.00	\$8284.00	\$8294.00
\$9227.00	\$8284.00	\$8294.00
\$7731.00	\$8284.00	\$8294.00
\$7306.00	\$8284.00	\$8294.00
\$9100.00	\$8284.00	\$8294.00
\$7975.00	\$8284.00	\$8294.00

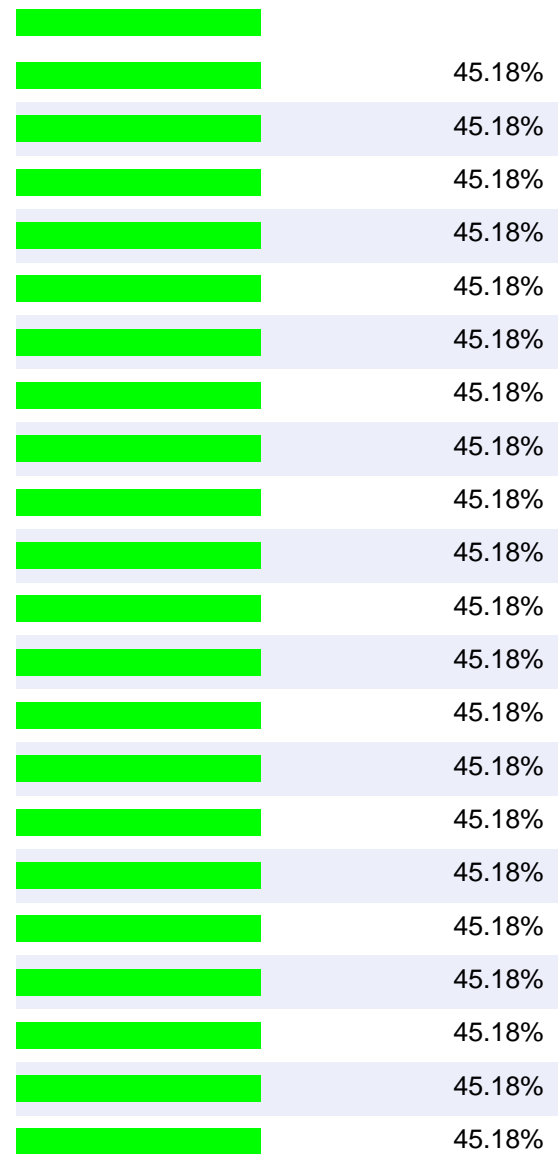
IP-Acute

Based on Spending Breakdown by Claim

	44.09%		45.73%
	46.85%		45.73%
	46.52%		45.73%
	41.95%		45.73%
	46.44%		45.73%
	49.37%		45.73%
	44.75%		45.73%
	45.89%		45.73%
	54.26%		45.73%
	40.6%		45.73%
	46.32%		45.73%
	47.32%		45.73%
	53.77%		45.73%
	45.64%		45.73%
	46.37%		45.73%
	51.79%		45.73%
	53.62%		45.73%
	48.33%		45.73%
	41.75%		45.73%
	45.29%		45.73%
	45.36%		45.73%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

OTSEGO MEMORIAL HOSPITAL	230133	MI
MCLAREN FLINT	230141	MI
OAKWOOD ANNAPOLIS HOSPITAL	230142	MI
HENRY FORD WYANDOTTE HOSPITAL	230146	MI
BOTSFORD HOSPITAL	230151	MI
ST JOSEPH MERCY HOSPITAL	230156	MI
ST JOHN HOSPITAL AND MEDICAL CENTER	230165	MI
MCLAREN - GREATER LANSING	230167	MI
METRO HEALTH HOSPITAL	230236	MI
NORTH OTTAWA COMMUNITY HOSPITAL	230174	MI
OAKWOOD SOUTHSORE MEDICAL CENTER	230176	MI
MIDMICHIGAN MEDICAL CENTER-CLARE	230180	MI
MCLAREN LAPEER REGION	230193	MI
ST JOHN MACOMB-OAKLAND HOSPITAL-MACOMB CENTER	230195	MI
GENESYS REGIONAL MEDICAL CENTER - HEALTH PARK	230197	MI
MCLAREN OAKLAND	230207	MI
CARSON CITY HOSPITAL	230208	MI
PORT HURON HOSPITAL	230216	MI
OAKLAWN HOSPITAL	230217	MI

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$7976.00	\$8284.00	\$8294.00
\$8765.00	\$8284.00	\$8294.00
\$6967.00	\$8284.00	\$8294.00
\$7678.00	\$8284.00	\$8294.00
\$6845.00	\$8284.00	\$8294.00
\$8975.00	\$8284.00	\$8294.00
\$8360.00	\$8284.00	\$8294.00
\$8371.00	\$8284.00	\$8294.00
\$8489.00	\$8284.00	\$8294.00
\$6907.00	\$8284.00	\$8294.00
\$7281.00	\$8284.00	\$8294.00
\$6105.00	\$8284.00	\$8294.00
\$7298.00	\$8284.00	\$8294.00
\$7369.00	\$8284.00	\$8294.00
\$9220.00	\$8284.00	\$8294.00
\$7955.00	\$8284.00	\$8294.00
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\$6937.00	\$8284.00	\$8294.00

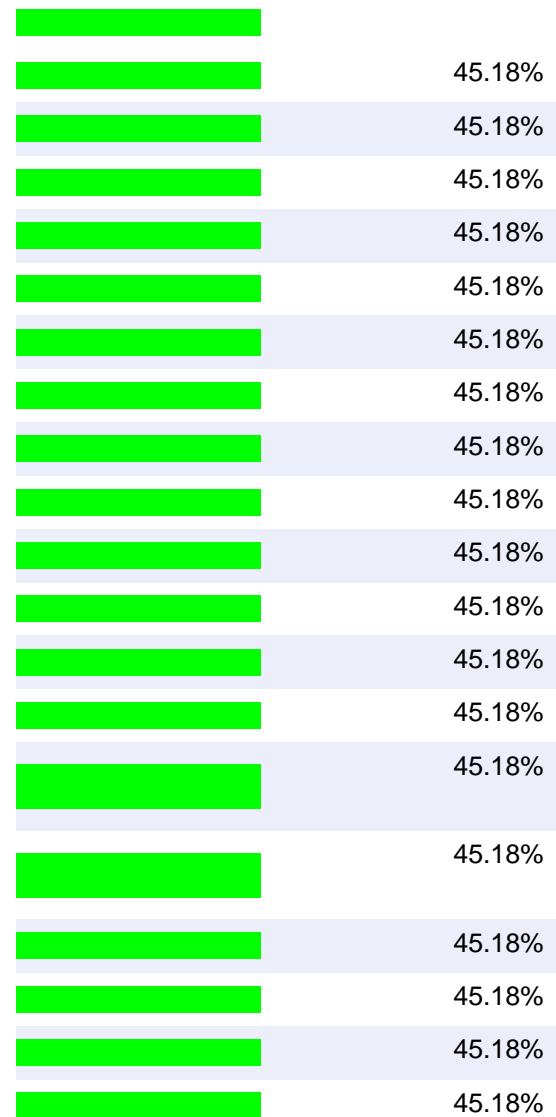
IP-Acute

Based on Spending Breakdown by Claim

	51%		45.73%
	47.77%		45.73%
	39.98%		45.73%
	40.98%		45.73%
	36.99%		45.73%
	47.9%		45.73%
	42.76%		45.73%
	50.38%		45.73%
	48.35%		45.73%
	40.51%		45.73%
	42.66%		45.73%
	45.43%		45.73%
	47.52%		45.73%
	40.84%		45.73%
	48.15%		45.73%
	43.85%		45.73%
	40.63%		45.73%
	49.32%		45.73%
	46.27%		45.73%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

MIDMICHIGAN MEDICAL CENTER-MIDLAND	230222	MI
MOUNT CLEMENS REGIONAL MEDICAL CENTER	230227	MI
EDWARD W SPARROW HOSPITAL	230230	MI
CHIPPEWA COUNTY WAR MEMORIAL HOSPITAL	230239	MI
ST JOHN RIVER DISTRICT HOSPITAL	230241	MI
GARDEN CITY HOSPITAL	230244	MI
CRITTENTON HOSPITAL MEDICAL CENTER	230254	MI
CHELSEA COMMUNITY HOSPITAL	230259	MI
WILLIAM BEAUMONT HOSPITAL - TROY	230269	MI
OAKWOOD HOSPITAL HERITAGE CENTER	230270	MI
DETROIT RECEIVING HOSPITAL	230273	MI
HEALTHSOURCE SAGINAW	230275	MI
HURON VALLEY-SINAI HOSPITAL	230277	MI
BRIGHTON HOSPITAL	230279	MI
KARMANOS CANCER CENTER	230297	MI
OAKLAND REGIONAL HOSPITAL	230301	MI
HENRY FORD WEST BLOOMFIELD HOSPITAL	230302	MI
NORTH MEMORIAL MEDICAL CENTER	240001	MN
ESSENTIA HEALTH ST MARY'S MEDICAL CENTER	240002	MN
HENNEPIN COUNTY MEDICAL CENTER	240004	MN
OLMSTED MEDICAL CENTER	240006	MN
ST MARYS HOSPITAL	240010	MN

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





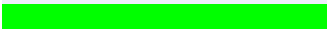
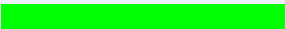
















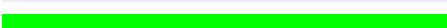
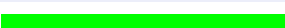
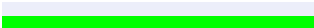
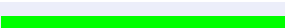
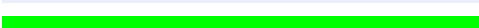
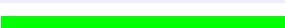
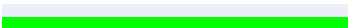
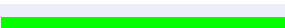
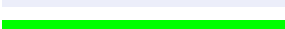
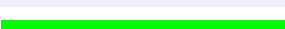
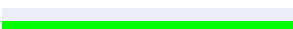
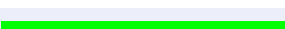
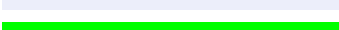
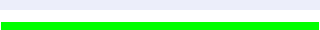
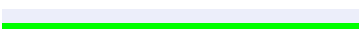
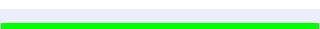
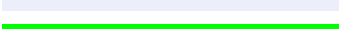
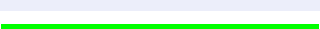


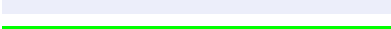
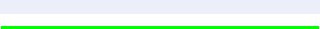
IP-Acute

Based on Spending Breakdown by Claim

	\$8671.00	\$8284.00	\$8294.00
	\$8051.00	\$8284.00	\$8294.00
	\$8293.00	\$8284.00	\$8294.00
	\$6903.00	\$8284.00	\$8294.00
	\$6277.00	\$8284.00	\$8294.00
	\$6802.00	\$8284.00	\$8294.00
	\$8350.00	\$8284.00	\$8294.00
	\$8255.00	\$8284.00	\$8294.00
	\$7947.00	\$8284.00	\$8294.00
	\$6994.00	\$8284.00	\$8294.00
	\$7528.00	\$8284.00	\$8294.00
	\$3609.00	\$8284.00	\$8294.00
	\$8171.00	\$8284.00	\$8294.00
	\$4911.00	\$8284.00	\$8294.00
	\$9922.00	\$8284.00	\$8294.00
	\$7656.00	\$8284.00	\$8294.00
	\$7544.00	\$8284.00	\$8294.00
	\$8461.00	\$8835.00	\$8294.00
	\$9664.00	\$8835.00	\$8294.00
	\$8737.00	\$8835.00	\$8294.00
	\$7930.00	\$8835.00	\$8294.00
	\$11616.00	\$8835.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	55.18%		45.73%
	43.99%		45.73%
	46.06%		45.73%
	49.82%		45.73%
	40.51%		45.73%
	36.52%		45.73%
	43.4%		45.73%
	50.71%		45.73%
	45.99%		45.73%
	36.33%		45.73%
	41.96%		45.73%
	63.48%		45.73%
	44.32%		45.73%
	67.77%		45.73%
	49.19%		45.73%
	40.16%		45.73%
	41.43%		45.73%
	48.08%		51.18%
	50.72%		51.18%
	47.92%		51.18%
	53.46%		51.18%
	55.41%		51.18%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

NORTHFIELD HOSPITAL	240014	MN
FAIRVIEW RED WING HOSPITAL	240018	MN
ESSENTIA HEALTH DULUTH	240019	MN
CAMBRIDGE MEDICAL CENTER	240020	MN
SANFORD WORTHINGTON MEDICAL CENTER	240022	MN
DOUGLAS COUNTY HOSPITAL	240030	MN
ST CLOUD HOSPITAL	240036	MN
UNITED HOSPITAL	240038	MN
UNIVERSITY MEDICAL CENTER-MESABI/ MESABA CLINICS	240040	MN
MAYO CLINIC HEALTH SYSTEM - ALBERT LEA	240043	MN
WINONA HEALTH SERVICES	240044	MN
ST LUKES HOSPITAL	240047	MN
FAIRVIEW LAKES HEALTH SERVICES	240050	MN
LAKE REGION HEALTHCARE CORPORATION	240052	MN
PARK NICOLLET METHODIST HOSPITAL	240053	MN
RIDGEVIEW MEDICAL CENTER	240056	MN
ABBOTT NORTHWESTERN HOSPITAL	240057	MN
REGINA MEDICAL CENTER	240059	MN
MAYO CLINIC METHODIST HOSPITAL	240061	MN
HEALTHEAST ST JOSEPH'S HOSPITAL	240063	MN

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$5855.00	\$8835.00	\$8294.00
\$7220.00	\$8835.00	\$8294.00
\$7486.00	\$8835.00	\$8294.00
\$6708.00	\$8835.00	\$8294.00
\$5861.00	\$8835.00	\$8294.00
\$9108.00	\$8835.00	\$8294.00
\$8194.00	\$8835.00	\$8294.00
\$8155.00	\$8835.00	\$8294.00
\$5710.00	\$8835.00	\$8294.00
\$6813.00	\$8835.00	\$8294.00
\$6157.00	\$8835.00	\$8294.00
\$8954.00	\$8835.00	\$8294.00
\$6374.00	\$8835.00	\$8294.00
\$6736.00	\$8835.00	\$8294.00
\$8361.00	\$8835.00	\$8294.00
\$7564.00	\$8835.00	\$8294.00
\$10565.00	\$8835.00	\$8294.00
\$6887.00	\$8835.00	\$8294.00
\$11628.00	\$8835.00	\$8294.00
\$8477.00	\$8835.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.29%		51.18%
	50.43%		51.18%
	54.62%		51.18%
	48.13%		51.18%
	42.75%		51.18%
	51.41%		51.18%
	52.11%		51.18%
	51.04%		51.18%
	48.82%		51.18%
	46.18%		51.18%
	47.09%		51.18%
	48.2%		51.18%
	46.41%		51.18%
	43.67%		51.18%
	48.18%		51.18%
	46.17%		51.18%
	55.81%		51.18%
	50.93%		51.18%
	56.67%		51.18%
	49.66%		51.18%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

GRAND ITASCA CLINIC AND HOSPITAL	240064	MN
LAKEVIEW MEMORIAL HOSPITAL	240066	MN
OWATONNA HOSPITAL	240069	MN
DISTRICT ONE HOSPITAL	240071	MN
ESSENTIA HEALTH ST JOSEPH'S MEDICAL CENTER	240075	MN
BUFFALO HOSPITAL	240076	MN
FAIRVIEW SOUTHDAL E HOSPITAL	240078	MN
UNIVERSITY OF MINNESOTA MEDICAL CENTER, FAIRVIEW	240080	MN
VIRGINIA REGIONAL MEDICAL CENTER	240084	MN
RICE MEMORIAL HOSPITAL	240088	MN
MAYO CLINIC HEALTH SYSTEM - MANKATO	240093	MN
SANFORD BEMIDJI MEDICAL CENTER	240100	MN
ESSENTIA HEALTH ST MARYS	240101	MN
ST FRANCIS REGIONAL MEDICAL CENTER	240104	MN
REGIONS HOSPITAL	240106	MN
MERCY HOSPITAL	240115	MN
MAYO CLINIC HEALTH SYSTEM - AUSTIN	240117	MN
UNITY HOSPITAL	240132	MN
FAIRVIEW NORTHLAND REGIONAL HOSPITAL	240141	MN
MAYO CLINIC HEALTH SYSTEM - FAIRMONT	240166	MN

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





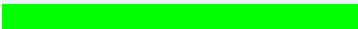
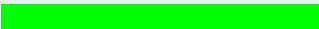










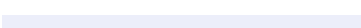
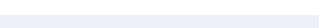
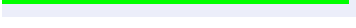
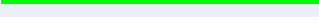
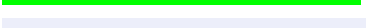
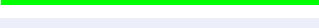
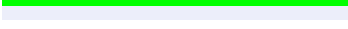
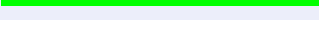




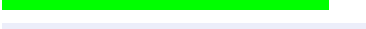
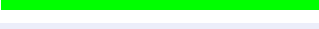
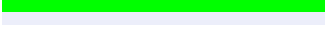
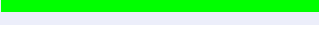


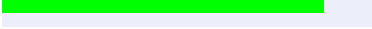
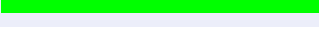


IP-Acute

Based on Spending Breakdown by Claim

\$6716.00	\$8835.00	\$8294.00
\$9119.00	\$8835.00	\$8294.00
\$7243.00	\$8835.00	\$8294.00
\$6596.00	\$8835.00	\$8294.00
\$7070.00	\$8835.00	\$8294.00
\$5481.00	\$8835.00	\$8294.00
\$9241.00	\$8835.00	\$8294.00
\$10637.00	\$8835.00	\$8294.00
\$7226.00	\$8835.00	\$8294.00
\$6992.00	\$8835.00	\$8294.00
\$8460.00	\$8835.00	\$8294.00
\$7342.00	\$8835.00	\$8294.00
\$7057.00	\$8835.00	\$8294.00
\$6516.00	\$8835.00	\$8294.00
\$8948.00	\$8835.00	\$8294.00
\$7817.00	\$8835.00	\$8294.00
\$6609.00	\$8835.00	\$8294.00
\$7601.00	\$8835.00	\$8294.00
\$7039.00	\$8835.00	\$8294.00
\$6364.00	\$8835.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.22%		51.18%
	53.34%		51.18%
	50.68%		51.18%
	48.27%		51.18%
	51.01%		51.18%
	44.48%		51.18%
	49.06%		51.18%
	51.9%		51.18%
	49.27%		51.18%
	50.88%		51.18%
	50.06%		51.18%
	51.49%		51.18%
	49.09%		51.18%
	46.43%		51.18%
	50.71%		51.18%
	51.42%		51.18%
	45.72%		51.18%
	48.94%		51.18%
	52.52%		51.18%
	51.93%		51.18%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
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	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

HUTCHINSON AREA HEALTH CARE	240187	MN
FAIRVIEW RIDGES HOSPITAL	240207	MN
HEALTHEAST ST JOHN'S HOSPITAL	240210	MN
HEALTHEAST WOODWINDS HOSPITAL	240213	MN
MAPLE GROVE HOSPITAL	240214	MN
UNIVERSITY HOSPITALS AND HEALTH SYSTEM	250001	MS
TISHOMINGO HEALTH SERVICES INC	250002	MS
NORTH MISSISSIPPI MEDICAL CENTER	250004	MS
BAPTIST MEMORIAL HOSPITAL UNION COUNTY	250006	MS
BILOXI REGIONAL MEDICAL CENTER	250007	MS
MAGNOLIA REGIONAL HEALTH CENTER	250009	MS
TIPPAH COUNTY HOSPITAL	250010	MS
ALLIANCE HEALTHCARE SYSTEM	250012	MS
GRENADA LAKE MEDICAL CENTER	250015	MS
TRACE REGIONAL HOSP AND SWING BED	250017	MS
MEMORIAL HOSPITAL AT GULFPORT	250019	MS
WEBSTER HEALTH SERVICES	250020	MS
GILMORE MEMORIAL HOSPITAL	250025	MS
WINSTON MEDICAL CENTER & SWINGBED	250027	MS
RIVER REGION HEALTH SYSTEM	250031	MS
BAPTIST MEMORIAL HOSPITAL NORTH MS	250034	MS
GEORGE COUNTY HOSPITAL	250036	MS

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





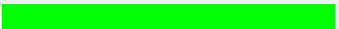
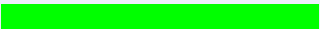
















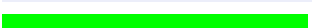
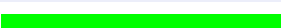
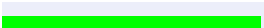
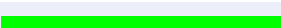
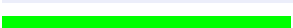
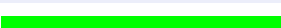
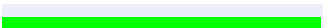
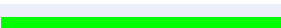
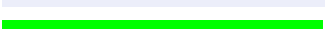
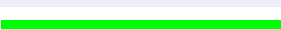
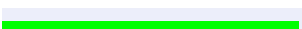
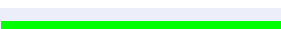
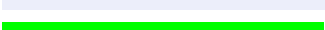
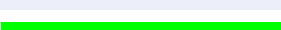
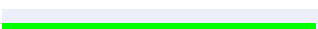
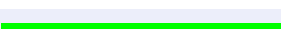
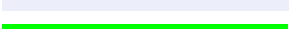
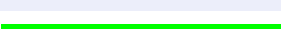


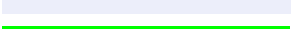
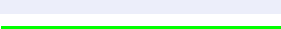
IP-Acute

Based on Spending Breakdown by Claim

	\$6944.00	\$8835.00	\$8294.00
	\$7938.00	\$8835.00	\$8294.00
	\$7265.00	\$8835.00	\$8294.00
	\$8198.00	\$8835.00	\$8294.00
	\$6849.00	\$8835.00	\$8294.00
	\$9894.00	\$7780.00	\$8294.00
	\$5906.00	\$7780.00	\$8294.00
	\$9781.00	\$7780.00	\$8294.00
	\$6074.00	\$7780.00	\$8294.00
	\$6951.00	\$7780.00	\$8294.00
	\$8149.00	\$7780.00	\$8294.00
	\$5994.00	\$7780.00	\$8294.00
	\$4865.00	\$7780.00	\$8294.00
	\$6636.00	\$7780.00	\$8294.00
	\$5482.00	\$7780.00	\$8294.00
	\$8146.00	\$7780.00	\$8294.00
	\$5379.00	\$7780.00	\$8294.00
	\$5855.00	\$7780.00	\$8294.00
	\$4879.00	\$7780.00	\$8294.00
	\$6850.00	\$7780.00	\$8294.00
	\$9032.00	\$7780.00	\$8294.00
	\$5538.00	\$7780.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	51.53%		51.18%
	47.86%		51.18%
	47.17%		51.18%
	50.57%		51.18%
	48.59%		51.18%
	44.79%		45.26%
	38.23%		45.26%
	50.87%		45.26%
	42.89%		45.26%
	46.68%		45.26%
	49.4%		45.26%
	43.36%		45.26%
	36.77%		45.26%
	41%		45.26%
	45.19%		45.26%
	45.57%		45.26%
	42.14%		45.26%
	45.68%		45.26%
	44.57%		45.26%
	40.57%		45.26%
	50.16%		45.26%
	40.77%		45.26%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

MADISON RIVER OAKS MEDICAL CENTER	250038	MS
SINGING RIVER HOSPITAL	250040	MS
NORTHWEST MISSISSIPPI REGIONAL MEDICAL CENTER	250042	MS
NESHOBA COUNTY GENERAL HOSPITAL	250043	MS
BAPTIST MEMORIAL HOSPITAL BOONEVILLE	250044	MS
ST DOMINIC-JACKSON MEMORIAL HOSPITAL	250048	MS
BEACHAM MEMORIAL HOSPITAL	250049	MS
OCH REGIONAL MEDICAL CENTER	250050	MS
KILMICHAEL HOSPITAL	250051	MS
KING'S DAUGHTERS MEDICAL CENTER-BROOKHAVEN	250057	MS
SOUTH CENTRAL REG MED CTR	250058	MS
MONTFORT JONES MEMORIAL HOSPITAL	250059	MS
JEFFERSON COUNTY HOSPITAL	250060	MS
YALOBUSHA GENERAL HOSPITAL	250061	MS
CLAY COUNTY MEDICAL CORPORATION	250067	MS
RUSH FOUNDATION HOSPITAL	250069	MS
CENTRAL MISSISSIPPI MEDICAL CENTER	250072	MS
WAYNE GENERAL HOSPITAL	250077	MS
FORREST GENERAL HOSPITAL	250078	MS

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$5299.00	\$7780.00	\$8294.00
\$8456.00	\$7780.00	\$8294.00
\$6259.00	\$7780.00	\$8294.00
\$5125.00	\$7780.00	\$8294.00
\$5183.00	\$7780.00	\$8294.00
\$8179.00	\$7780.00	\$8294.00
\$5035.00	\$7780.00	\$8294.00
\$6095.00	\$7780.00	\$8294.00
\$4513.00	\$7780.00	\$8294.00
\$7253.00	\$7780.00	\$8294.00
\$6941.00	\$7780.00	\$8294.00
\$4611.00	\$7780.00	\$8294.00
\$4439.00	\$7780.00	\$8294.00
\$4766.00	\$7780.00	\$8294.00
\$4945.00	\$7780.00	\$8294.00
\$7703.00	\$7780.00	\$8294.00
\$8040.00	\$7780.00	\$8294.00
\$5244.00	\$7780.00	\$8294.00
\$8669.00	\$7780.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	39.33%		45.26%
	42.27%		45.26%
	41.2%		45.26%
	52.73%		45.26%
	38.38%		45.26%
	46.75%		45.26%
	40.21%		45.26%
	42.95%		45.26%
	41.92%		45.26%
	39.93%		45.26%
	47.75%		45.26%
	40.17%		45.26%
	35.38%		45.26%
	51.11%		45.26%
	38.6%		45.26%
	41.65%		45.26%
	42.69%		45.26%
	44.03%		45.26%
	45.46%		45.26%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

SHARKEY ISSAQUENA COMMUNITY HOSPITAL	250079	MS
ANDERSON REGIONAL MEDICAL CENTER SOUTH CAMPUS	250081	MS
DELTA REGIONAL MEDICAL CENTER	250082	MS
NATCHEZ REGIONAL MEDICAL CENTER	250084	MS
MARION GENERAL HOSPITAL	250085	MS
BOLIVAR MEDICAL CENTER	250093	MS
WESLEY MEDICAL CENTER	250094	MS
SOUTH SUNFLOWER COUNTY HOSPITAL	250095	MS
CROSSGATES RIVER OAKS HOSPITAL	250096	MS
SOUTHWEST MS REGIONAL MEDICAL CENTER	250097	MS
GREENWOOD LEFLORE HOSPITAL	250099	MS
BAPTIST MEM HOSP/GOLDEN TRIANGLE INC	250100	MS
MISSISSIPPI BAPTIST MEDICAL CENTER	250102	MS
ANDERSON REGIONAL MEDICAL CENTER	250104	MS
HIGHLAND COMMUNITY HOSPITAL	250117	MS
NATCHEZ COMMUNITY HOSPITAL/SWING BED	250122	MS
GARDEN PARK MEDICAL CENTER	250123	MS
MAGEE GENERAL HOSPITAL	250124	MS
NORTH OAK REGIONAL MEDICAL CENTER	250126	MS
TRI LAKES MEDICAL CENTER	250128	MS
WHITFIELD MEDICAL SURGICAL HOSPITAL	250134	MS

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient













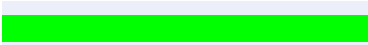
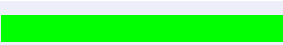




























IP-Acute

Based on Spending Breakdown by Claim

\$4713.00	\$7780.00	\$8294.00
\$7100.00	\$7780.00	\$8294.00
\$7271.00	\$7780.00	\$8294.00
\$6426.00	\$7780.00	\$8294.00
\$4859.00	\$7780.00	\$8294.00
\$6380.00	\$7780.00	\$8294.00
\$8718.00	\$7780.00	\$8294.00
\$6108.00	\$7780.00	\$8294.00
\$6569.00	\$7780.00	\$8294.00
\$7533.00	\$7780.00	\$8294.00
\$7346.00	\$7780.00	\$8294.00
\$8511.00	\$7780.00	\$8294.00
\$8378.00	\$7780.00	\$8294.00
\$7856.00	\$7780.00	\$8294.00
\$5357.00	\$7780.00	\$8294.00
\$5670.00	\$7780.00	\$8294.00
\$8119.00	\$7780.00	\$8294.00
\$4834.00	\$7780.00	\$8294.00
\$4787.00	\$7780.00	\$8294.00
\$5051.00	\$7780.00	\$8294.00
\$6299.00	\$7780.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	40.84%		45.26%
	40.73%		45.26%
	43.73%		45.26%
	38.54%		45.26%
	37.14%		45.26%
	40.07%		45.26%
	52.31%		45.26%
	40.06%		45.26%
	39.3%		45.26%
	45.57%		45.26%
	40.59%		45.26%
	45.25%		45.26%
	45.95%		45.26%
	44.11%		45.26%
	39.71%		45.26%
	38.88%		45.26%
	46.79%		45.26%
	38.73%		45.26%
	38.39%		45.26%
	42.65%		45.26%
	70.39%		45.26%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

WOMAN'S HOSPITAL AT RIVER OAKS	250136	MS
RIVER OAKS HOSPITAL	250138	MS
BAPTIST MEMORIAL HOSPITAL DESOTO	250141	MS
ALLIANCE HEALTH CENTER	250151	MS
HANCOCK MEDICAL CENTER	250162	MS
MERCY HOSPITAL JOPLIN	260001	MO
COOPER COUNTY MEMORIAL HOSPITAL	260004	MO
SSM ST JOSEPH HEALTH CENTER	260005	MO
HEARTLAND REGIONAL MEDICAL CENTER	260006	MO
BOTHWELL REGIONAL HEALTH CENTER	260009	MO
ST MARYS HEALTH CENTER	260011	MO
KENNETT HMA INC DBA TWIN RIVERS REGIONAL MEDICAL CENTER	260015	MO
PHELPS COUNTY REGIONAL MEDICAL CENTER	260017	MO
MERCY HOSPITAL - ST LOUIS	260020	MO
NORTHEAST REGIONAL MEDICAL CENTER	260022	MO
JEFFERSON REGIONAL MEDICAL CENTER	260023	MO
TEXAS COUNTY MEMORIAL HOSPITAL	260024	MO
HANNIBAL REGIONAL HOSPITAL	260025	MO
RESEARCH MEDICAL CENTER	260027	MO
BARNES JEWISH HOSPITAL	260032	MO
BATES COUNTY MEMORIAL HOSPITAL	260034	MO

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





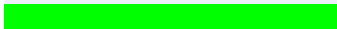
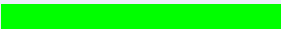
















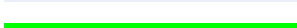
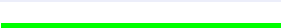














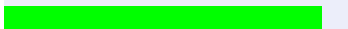
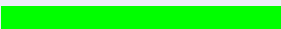


IP-Acute

Based on Spending Breakdown by Claim

\$5329.00	\$7780.00	\$8294.00
\$8289.00	\$7780.00	\$8294.00
\$8747.00	\$7780.00	\$8294.00
\$3524.00	\$7780.00	\$8294.00
\$6821.00	\$7780.00	\$8294.00
\$7571.00	\$8478.00	\$8294.00
\$4593.00	\$8478.00	\$8294.00
\$7871.00	\$8478.00	\$8294.00
\$8089.00	\$8478.00	\$8294.00
\$6850.00	\$8478.00	\$8294.00
\$8548.00	\$8478.00	\$8294.00
\$6139.00	\$8478.00	\$8294.00
\$8100.00	\$8478.00	\$8294.00
\$8717.00	\$8478.00	\$8294.00
\$8080.00	\$8478.00	\$8294.00
\$7395.00	\$8478.00	\$8294.00
\$5463.00	\$8478.00	\$8294.00
\$7791.00	\$8478.00	\$8294.00
\$9049.00	\$8478.00	\$8294.00
\$9895.00	\$8478.00	\$8294.00
\$5818.00	\$8478.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	56.19%		45.26%
	45.96%		45.26%
	47.52%		45.26%
	38.66%		45.26%
	38.59%		45.26%
	47.87%		47.45%
	52.74%		47.45%
	44.75%		47.45%
	46.62%		47.45%
	50.91%		47.45%
	51.52%		47.45%
	41.53%		47.45%
	43.85%		47.45%
	47.66%		47.45%
	47.71%		47.45%
	42.59%		47.45%
	44.23%		47.45%
	47.97%		47.45%
	45.07%		47.45%
	48.87%		47.45%
	40.06%		47.45%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

COX MEDICAL CENTER	260040	MO
CAPITAL REGION MEDICAL CENTER	260047	MO
TRUMAN MEDICAL CENTER HOSPITAL HILL	260048	MO
SSM REGIONAL HEALTH SERVICES OWNING AND OPERATING ST FRANCIS HOSPITAL & HEALTH SERVICES	260050	MO
MERCY HOSPITAL WASHINGTON	260052	MO
CAMERON REGIONAL MEDICAL CENTER	260057	MO
ST JOHNS HOSPITAL-LEBANON	260059	MO
NEVADA REGIONAL MEDICAL CENTER	260061	MO
ST LUKES NORTHLAND HOSPITAL	260062	MO
AUDRAIN MEDICAL CENTER	260064	MO
MERCY HOSPITAL OF SPRINGFIELD	260065	MO
BOONE HOSPITAL CENTER	260068	MO
PEMISCOT MEMORIAL HOSPITAL	260070	MO
MOBERLY REGIONAL MEDICAL CENTER	260074	MO
ST ANTHONY'S MEDICAL CENTER	260077	MO
OZARKS MEDICAL CENTER	260078	MO
RIPLEY COUNTY MEMORIAL HOSPITAL	260080	MO
SSM ST CLARE HEALTH CENTER	260081	MO
ST JOSEPH MEDICAL CENTER	260085	MO
SSM ST MARYS HEALTH CENTER	260091	MO

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





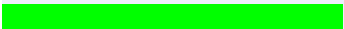
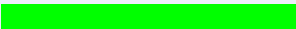


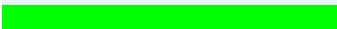
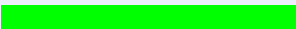


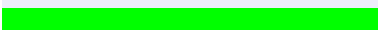
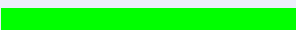


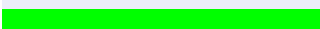
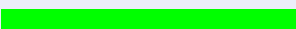


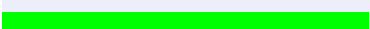
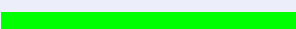




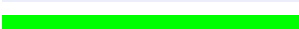
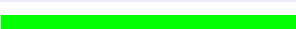
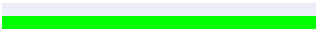
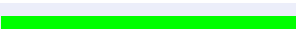
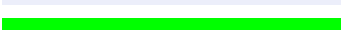
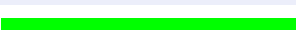
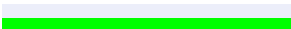
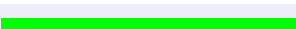
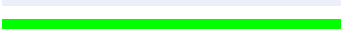
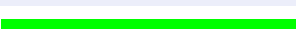
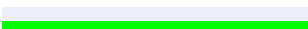
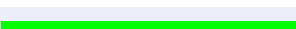


IP-Acute

Based on Spending Breakdown by Claim

\$9453.00	\$8478.00	\$8294.00
\$8032.00	\$8478.00	\$8294.00
\$6947.00	\$8478.00	\$8294.00
\$6775.00	\$8478.00	\$8294.00
\$8495.00	\$8478.00	\$8294.00
\$6179.00	\$8478.00	\$8294.00
\$6711.00	\$8478.00	\$8294.00
\$6371.00	\$8478.00	\$8294.00
\$6707.00	\$8478.00	\$8294.00
\$6700.00	\$8478.00	\$8294.00
\$9700.00	\$8478.00	\$8294.00
\$10369.00	\$8478.00	\$8294.00
\$4652.00	\$8478.00	\$8294.00
\$6993.00	\$8478.00	\$8294.00
\$8628.00	\$8478.00	\$8294.00
\$7321.00	\$8478.00	\$8294.00
\$5298.00	\$8478.00	\$8294.00
\$8822.00	\$8478.00	\$8294.00
\$8541.00	\$8478.00	\$8294.00
\$7878.00	\$8478.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	50.57%		47.45%
	49.5%		47.45%
	48.34%		47.45%
	42.26%		47.45%
			
	47.71%		47.45%
	39.7%		47.45%
	53.3%		47.45%
	50.38%		47.45%
	45.19%		47.45%
	45.05%		47.45%
	52.12%		47.45%
	53.89%		47.45%
	48.34%		47.45%
	42.1%		47.45%
	44.47%		47.45%
	48.09%		47.45%
	41.1%		47.45%
	48.35%		47.45%
	43.39%		47.45%
	43.01%		47.45%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

SKAGGS REGIONAL MEDICAL CENTER	260094	MO
CENTERPOINT MEDICAL CENTER OF INDEPENDENCE, LCC	260095	MO
NORTH KANSAS CITY HOSPITAL	260096	MO
WESTERN MISSOURI MEDICAL CENTER	260097	MO
TRUMAN MEDICAL CENTER LAKEWOOD	260102	MO
SSM DEPAUL HEALTH CENTER	260104	MO
ST LOUIS UNIVERSITY HOSPITAL	260105	MO
MISSOURI BAPTIST MEDICAL CENTER	260108	MO
SOUTHEAST MISSOURI HOSPITAL	260110	MO
MISSOURI DELTA MEDICAL CENTER	260113	MO
MISSOURI BAPTIST HOSPITAL SULLIVAN	260115	MO
MINERAL AREA REGIONAL MEDICAL CENTER	260116	MO
POPLAR BLUFF REGIONAL MEDICAL CENTER	260119	MO
FREEMAN HEALTH SYSTEM-FREEMAN WEST	260137	MO
ST LUKES HOSPITAL OF KANSAS CITY	260138	MO
UNIVERSITY OF MISSOURI HOSPITAL & CLINICS	260141	MO
FITZGIBBON MEMORIAL HOSPITAL	260142	MO
SAC-OSAGE HOSPITAL	260147	MO
MISSOURI SOUTHERN HEALTHCARE	260160	MO
BARNES JEWISH WEST COUNTY HOSPITAL	260162	MO
PARKLAND HEALTH CENTER	260163	MO

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient













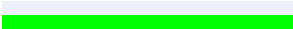
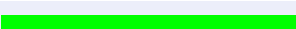
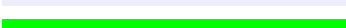
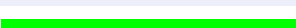
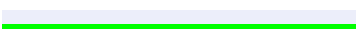
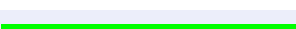
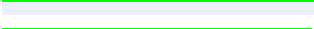
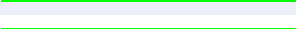
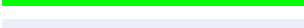
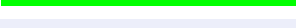
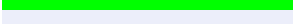
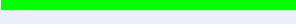












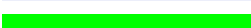
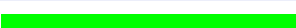
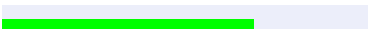
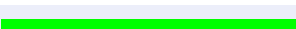
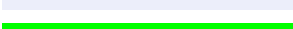
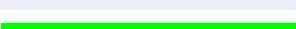
IP-Acute

Based on Spending Breakdown by Claim

	\$7494.00	\$8478.00	\$8294.00
	\$8226.00	\$8478.00	\$8294.00
	\$8481.00	\$8478.00	\$8294.00
	\$6538.00	\$8478.00	\$8294.00
	\$6548.00	\$8478.00	\$8294.00
	\$8718.00	\$8478.00	\$8294.00
	\$8794.00	\$8478.00	\$8294.00
	\$9333.00	\$8478.00	\$8294.00
	\$9481.00	\$8478.00	\$8294.00
	\$7391.00	\$8478.00	\$8294.00
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	\$6147.00	\$8478.00	\$8294.00
	\$6852.00	\$8478.00	\$8294.00
	\$9227.00	\$8478.00	\$8294.00
	\$9791.00	\$8478.00	\$8294.00
	\$10440.00	\$8478.00	\$8294.00
	\$5692.00	\$8478.00	\$8294.00
	\$4729.00	\$8478.00	\$8294.00
	\$5137.00	\$8478.00	\$8294.00
	\$8594.00	\$8478.00	\$8294.00
	\$6158.00	\$8478.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	45.69%		47.45%
	44.27%		47.45%
	49.12%		47.45%
	47.29%		47.45%
	56.88%		47.45%
	44.69%		47.45%
	42.09%		47.45%
	48.94%		47.45%
	51.19%		47.45%
	44.02%		47.45%
	42.9%		47.45%
	41.71%		47.45%
	44.21%		47.45%
	50.38%		47.45%
	48.92%		47.45%
	51.11%		47.45%
	43.54%		47.45%
	46.4%		47.45%
	35.68%		47.45%
	52.02%		47.45%
	41.91%		47.45%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

GOLDEN VALLEY MEMORIAL HOSPITAL	260175	MO
DES PERES HOSPITAL	260176	MO
LIBERTY HOSPITAL	260177	MO
ST LUKES HOSPITAL	260179	MO
CHRISTIAN HOSPITAL NORTHEAST	260180	MO
SAINT FRANCIS MEDICAL CENTER	260183	MO
LAKE REGIONAL HEALTH SYSTEM	260186	MO
LEES SUMMIT MEDICAL CENTER	260190	MO
BARNES JEWISH ST PETERS HOSPITAL	260191	MO
ST MARYS MEDICAL CENTER	260193	MO
CITIZENS MEMORIAL HOSPITAL	260195	MO
SSM HEALTH CARE ST LOUIS, OWNING AND OPERATING SSM ST JOSEPH HOSPITAL WEST	260200	MO
OZARKS COMMUNITY HOSPITAL	260207	MO
CALLAWAY COMMUNITY HOSPITAL	260209	MO
ST ALEXIUS HOSPITAL	260210	MO
ST LUKES EAST LEES SUMMIT	260216	MO
BELTON REGIONAL MEDICAL CENTER	260214	MO
PROGRESS WEST HEALTHCARE CENTER	260219	MO
ST PETER'S HOSPITAL	270003	MT
BILLINGS CLINIC	270004	MT
BENEFIS HEALTH SYSTEM	270012	MT

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





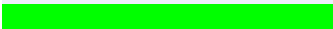
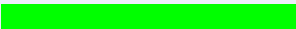
















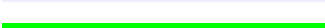
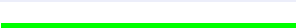














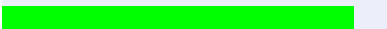
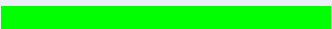


IP-Acute

Based on Spending Breakdown by Claim

\$5394.00	\$8478.00	\$8294.00
\$9410.00	\$8478.00	\$8294.00
\$7460.00	\$8478.00	\$8294.00
\$9031.00	\$8478.00	\$8294.00
\$8499.00	\$8478.00	\$8294.00
\$9298.00	\$8478.00	\$8294.00
\$7514.00	\$8478.00	\$8294.00
\$7085.00	\$8478.00	\$8294.00
\$8261.00	\$8478.00	\$8294.00
\$7512.00	\$8478.00	\$8294.00
\$7630.00	\$8478.00	\$8294.00
\$7536.00	\$8478.00	\$8294.00
\$6317.00	\$8478.00	\$8294.00
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\$7040.00	\$8478.00	\$8294.00
\$7308.00	\$8478.00	\$8294.00
\$7474.00	\$8478.00	\$8294.00
\$7471.00	\$9236.00	\$8294.00
\$9166.00	\$9236.00	\$8294.00
\$8688.00	\$9236.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.27%		47.45%
	47.81%		47.45%
	46.92%		47.45%
	49.37%		47.45%
	45.14%		47.45%
	48.78%		47.45%
	48.24%		47.45%
	42.17%		47.45%
	47.22%		47.45%
	41.54%		47.45%
	47.4%		47.45%
	45.75%		47.45%
	36.02%		47.45%
	43.1%		47.45%
	41.79%		47.45%
	43.87%		47.45%
	40.38%		47.45%
	44.86%		47.45%
	49.96%		53.03%
	54.47%		53.03%
	49%		53.03%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

ST. PATRICK HOSPITAL AND HEALTH SCIENCES CENTER	270014	MT
ST JAMES HEALTHCARE	270017	MT
COMMUNITY MEDICAL CENTER INC	270023	MT
NORTHERN MONTANA HOSPITAL	270032	MT
ST VINCENT HEALTHCARE	270049	MT
KALISPELL REGIONAL MEDICAL CENTER	270051	MT
BOZEMAN DEACONESS HOSPITAL	270057	MT
BLACKFEET COMMUNITY HOSPITAL-BROWNING	270074	MT
GREAT FALLS CLINIC MEDICAL CENTER	270086	MT
HEALTH CENTER NORTHWEST	270087	MT
BRYANLGH MEDICAL CENTER	280003	NE
GOOD SAMARITAN HOSPITAL	280009	NE
THE NEBRASKA MEDICAL CENTER	280013	NE
SAINT ELIZABETH REGIONAL MEDICAL CENTER	280020	NE
ST FRANCIS MEDICAL CENTER	280023	NE
CREIGHTON UNIVERSITY MEDICAL CENTER - SAINT JOSEPH	280030	NE
MARY LANNING MEMORIAL HOSPITAL	280032	NE
THE NEBRASKA METHODIST HOSPITAL	280040	NE
ALEGENT HEALTH BERGAN MERCY MEDICAL CENTER	280060	NE
REGIONAL WEST MEDICAL CENTER	280061	NE

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$11088.00	\$9236.00	\$8294.00
\$8713.00	\$9236.00	\$8294.00
\$9851.00	\$9236.00	\$8294.00
\$6212.00	\$9236.00	\$8294.00
\$10198.00	\$9236.00	\$8294.00
\$9100.00	\$9236.00	\$8294.00
\$8203.00	\$9236.00	\$8294.00
\$5108.00	\$9236.00	\$8294.00
\$10007.00	\$9236.00	\$8294.00
\$9072.00	\$9236.00	\$8294.00
\$9359.00	\$9025.00	\$8294.00
\$9496.00	\$9025.00	\$8294.00
\$9577.00	\$9025.00	\$8294.00
\$8459.00	\$9025.00	\$8294.00
\$7813.00	\$9025.00	\$8294.00
\$9324.00	\$9025.00	\$8294.00
\$7741.00	\$9025.00	\$8294.00
\$9563.00	\$9025.00	\$8294.00
\$9232.00	\$9025.00	\$8294.00
\$8988.00	\$9025.00	\$8294.00

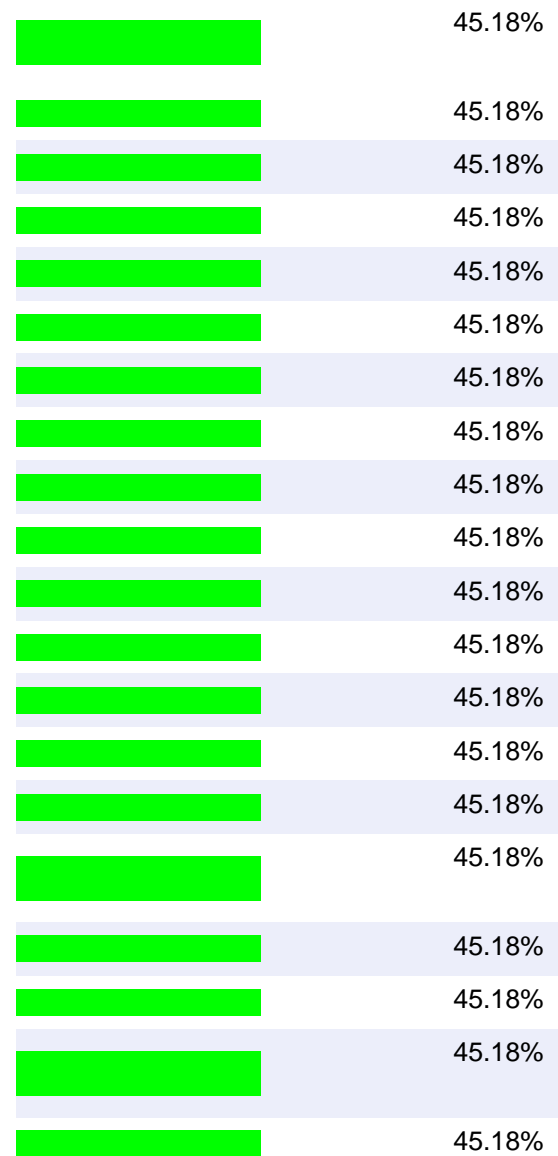
IP-Acute

Based on Spending Breakdown by Claim

<div></div>	58.92%	<div></div>	53.03%
<div></div>	50.6%	<div></div>	53.03%
<div></div>	56.4%	<div></div>	53.03%
<div></div>	52.87%	<div></div>	53.03%
<div></div>	52.82%	<div></div>	53.03%
<div></div>	51.24%	<div></div>	53.03%
<div></div>	49.87%	<div></div>	53.03%
<div></div>	54.91%	<div></div>	53.03%
<div></div>	62.34%	<div></div>	53.03%
<div></div>	67.11%	<div></div>	53.03%
<div></div>	47.76%	<div></div>	48.11%
<div></div>	52.51%	<div></div>	48.11%
<div></div>	47.86%	<div></div>	48.11%
<div></div>	45.63%	<div></div>	48.11%
<div></div>	45.14%	<div></div>	48.11%
<div></div>	47.78%	<div></div>	48.11%
<div></div>	46.32%	<div></div>	48.11%
<div></div>	46.52%	<div></div>	48.11%
<div></div>	49.67%	<div></div>	48.11%
<div></div>	52.2%	<div></div>	48.11%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

GREAT PLAINS REGIONAL MEDICAL CENTER	280065	NE
FREMONT AREA MEDICAL CENTER	280077	NE
ALEGENT HEALTH IMMANUEL MEDICAL CENTER	280081	NE
ALEGENT HEALTH-MIDLANDS COMMUNITY HOSPITAL	280105	NE
COLUMBUS COMMUNITY HOSPITAL	280111	NE
FAITH REGIONAL HEALTH SERVICES	280125	NE
LINCOLN SURGICAL HOSPITAL	280127	NE
NEBRASKA HEART HOSPITAL	280128	NE
NEBRASKA ORTHOPAEDIC HOSPITAL	280129	NE
ALEGENT HEALTH LAKESIDE HOSPITAL	280130	NE
MIDWEST SURGICAL HOSPITAL LLC	280131	NE
BELLEVUE MEDICAL CENTER	280132	NE
NEBRASKA SPINE HOSPITAL, LLC	280133	NE
RENOWN REGIONAL MEDICAL CENTER	290001	NV
SOUTH LYON MEDICAL CENTER	290002	NV
SUNRISE HOSPITAL AND MEDICAL CENTER	290003	NV
NORTH VISTA HOSPITAL	290005	NV
BANNER CHURCHILL COMMUNITY HOSPITAL	290006	NV
UMC OF SOUTHERN NEVADA	290007	NV
NORTHEASTERN NEVADA REGIONAL HOSPITAL	290008	NV

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7164.00	\$9025.00	\$8294.00
\$7105.00	\$9025.00	\$8294.00
\$7707.00	\$9025.00	\$8294.00
\$8295.00	\$9025.00	\$8294.00
\$6268.00	\$9025.00	\$8294.00
\$8654.00	\$9025.00	\$8294.00
\$11804.00	\$9025.00	\$8294.00
\$15856.00	\$9025.00	\$8294.00
\$11645.00	\$9025.00	\$8294.00
\$7109.00	\$9025.00	\$8294.00
\$14436.00	\$9025.00	\$8294.00
\$7590.00	\$9025.00	\$8294.00
\$24190.00	\$9025.00	\$8294.00
\$9286.00	\$8597.00	\$8294.00
\$4960.00	\$8597.00	\$8294.00
\$8545.00	\$8597.00	\$8294.00
\$7721.00	\$8597.00	\$8294.00
\$5792.00	\$8597.00	\$8294.00
\$9697.00	\$8597.00	\$8294.00
\$6737.00	\$8597.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	45.05%		48.11%
	42.49%		48.11%
	45.05%		48.11%
	44.22%		48.11%
	41.26%		48.11%
	48.37%		48.11%
	62.15%		48.11%
	65.91%		48.11%
	55%		48.11%
	42.5%		48.11%
	67.81%		48.11%
	43.12%		48.11%
	64.73%		48.11%
	47.16%		42.57%
	49.92%		42.57%
	39.81%		42.57%
	33.78%		42.57%
	44.67%		42.57%
	46.07%		42.57%
	44.55%		42.57%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

SAINT MARY'S REGIONAL MEDICAL CENTER	290009	NV
SAINT ROSE DOMINICAN HOSPITAL - DE LIMA	290012	NV
CARSON TAHOE REGIONAL MEDICAL CENTER	290019	NV
VALLEY HOSPITAL MEDICAL CENTER	290021	NV
DESERT SPRINGS HOSPITAL	290022	NV
NORTHERN NEVADA MEDICAL CENTER	290032	NV
MOUNTAINVIEW HOSPITAL	290039	NV
SUMMERLIN HOSPITAL MEDICAL CENTER	290041	NV
SAINT ROSE DOMINICAN HOSPITAL - SIENA CAMPUS	290045	NV
SPRING VALLEY HOSPITAL MEDICAL CENTER	290046	NV
SOUTHERN HILLS HOSPITAL AND MEDICAL CENTER	290047	NV
RENOWN SOUTH MEADOWS MEDICAL CENTER	290049	NV
SIERRA SURGERY & IMAGING, LLC	290051	NV
SAINT ROSE DOMINICAN HOSPITAL - SAN MARTIN CAMPUS	290053	NV
CENTENNIAL HILLS HOSPITAL MEDICAL CENTER	290054	NV
CONCORD HOSPITAL	300001	NH
MARY HITCHCOCK MEMORIAL HOSPITAL	300003	NH
LAKES REGION GENERAL HOSPITAL	300005	NH
ST JOSEPH HOSPITAL	300011	NH
ELLIOT HOSPITAL	300012	NH

IP-Acute

Based on Spending Breakdown by Claim

[illegible]




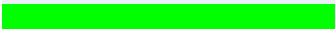
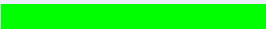
























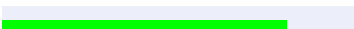
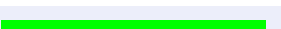
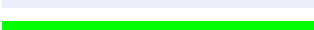
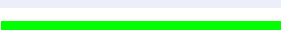
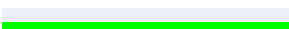
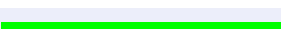
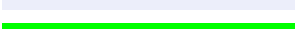
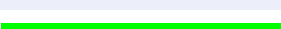
IP-Acute

Based on Spending Breakdown by Claim

\$8719.00	\$8597.00	\$8294.00
\$7322.00	\$8597.00	\$8294.00
\$7977.00	\$8597.00	\$8294.00
\$8774.00	\$8597.00	\$8294.00
\$8529.00	\$8597.00	\$8294.00
\$8464.00	\$8597.00	\$8294.00
\$8464.00	\$8597.00	\$8294.00
\$7553.00	\$8597.00	\$8294.00
\$9830.00	\$8597.00	\$8294.00
\$8531.00	\$8597.00	\$8294.00
\$9417.00	\$8597.00	\$8294.00
\$7691.00	\$8597.00	\$8294.00
\$13425.00	\$8597.00	\$8294.00
\$9049.00	\$8597.00	\$8294.00
\$7756.00	\$8597.00	\$8294.00
\$8334.00	\$8296.00	\$8294.00
\$10890.00	\$8296.00	\$8294.00
\$8498.00	\$8296.00	\$8294.00
\$7343.00	\$8296.00	\$8294.00
\$7298.00	\$8296.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	49.23%		42.57%
	35.35%		42.57%
	47.21%		42.57%
	38.75%		42.57%
	41.15%		42.57%
	50.05%		42.57%
	39.17%		42.57%
	38.13%		42.57%
	42.62%		42.57%
	39.62%		42.57%
	43.76%		42.57%
	50.87%		42.57%
	65.35%		42.57%
	42.92%		42.57%
	40.47%		42.57%
	46.06%		45.16%
	49.89%		45.16%
	44.04%		45.16%
	40.49%		45.16%
	41.63%		45.16%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

FRISBIE MEMORIAL HOSPITAL	300014	NH
PARKLAND MEDICAL CENTER	300017	NH
WENTWORTH-DOUGLASS HOSPITAL	300018	NH
CHESHIRE MEDICAL CENTER	300019	NH
SOUTHERN NH MEDICAL CENTER	300020	NH
EXETER HOSPITAL INC	300023	NH
PORTSMOUTH REGIONAL HOSPITAL	300029	NH
CATHOLIC MEDICAL CENTER	300034	NH
HACKENSACK UNIVERSITY MEDICAL CENTER	310001	NJ
NEWARK BETH ISRAEL MEDICAL CENTER	310002	NJ
PALISADES MEDICAL CENTER	310003	NJ
HUNTERDON MEDICAL CENTER	310005	NJ
ST MARY'S HOSPITAL, PASSAIC	310006	NJ
HOLY NAME MEDICAL CENTER	310008	NJ
CLARA MAASS MEDICAL CENTER	310009	NJ
UNIVERSITY MEDICAL CENTER OF PRINCETON AT PLAINSBORO	310010	NJ
CAPE REGIONAL MEDICAL CENTER	310011	NJ
VALLEY HOSPITAL	310012	NJ
COOPER UNIVERSITY HOSPITAL	310014	NJ
MORRISTOWN MEDICAL CENTER	310015	NJ

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$7025.00	\$8296.00	\$8294.00
\$6715.00	\$8296.00	\$8294.00
\$7672.00	\$8296.00	\$8294.00
\$6792.00	\$8296.00	\$8294.00
\$7809.00	\$8296.00	\$8294.00
\$7608.00	\$8296.00	\$8294.00
\$9414.00	\$8296.00	\$8294.00
\$9374.00	\$8296.00	\$8294.00
\$10205.00	\$7917.00	\$8294.00
\$9124.00	\$7917.00	\$8294.00
\$6546.00	\$7917.00	\$8294.00
\$7665.00	\$7917.00	\$8294.00
\$8359.00	\$7917.00	\$8294.00
\$7753.00	\$7917.00	\$8294.00
\$7829.00	\$7917.00	\$8294.00
\$7121.00	\$7917.00	\$8294.00
\$7125.00	\$7917.00	\$8294.00
\$8045.00	\$7917.00	\$8294.00
\$9016.00	\$7917.00	\$8294.00
\$10116.00	\$7917.00	\$8294.00

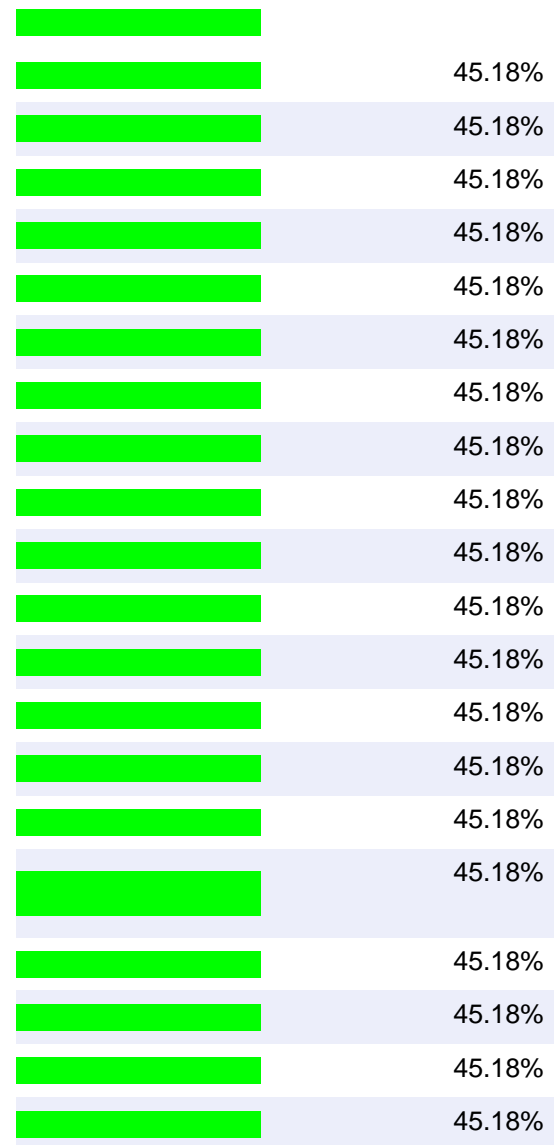
IP-Acute

Based on Spending Breakdown by Claim

	39.16%		45.16%
	37.56%		45.16%
	43.82%		45.16%
	41.41%		45.16%
	42.16%		45.16%
	42.42%		45.16%
	47.03%		45.16%
	47.43%		45.16%
	43.06%		40.06%
	43.16%		40.06%
	36.43%		40.06%
	43.32%		40.06%
	40.63%		40.06%
	38.53%		40.06%
	36.1%		40.06%
	37.34%		40.06%
	42.3%		40.06%
	39.25%		40.06%
	44.97%		40.06%
	45.78%		40.06%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

CHRIST HOSPITAL	310016	NJ
CHILTON HOSPITAL	310017	NJ
ST JOSEPH'S HOSPITAL AND MEDICAL CENTER	310019	NJ
ST FRANCIS MEDICAL CENTER	310021	NJ
VIRTUA WEST JERSEY HOSPITALS BERLIN	310022	NJ
ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL AT RAHWAY	310024	NJ
BAYONNE MEDICAL CENTER	310025	NJ
TRINITAS REGIONAL MEDICAL CENTER	310027	NJ
NEWTON MEDICAL CENTER	310028	NJ
OUR LADY OF LOURDES MEDICAL CENTER	310029	NJ
DEBORAH HEART AND LUNG CENTER	310031	NJ
SOUTH JERSEY HEALTHCARE REGIONAL MEDICAL CENTER	310032	NJ
RIVERVIEW MEDICAL CENTER	310034	NJ
ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL	310038	NJ
RARITAN BAY MEDICAL CENTER	310039	NJ
HOBOKEN UNIVERSITY MEDICAL CENTER	310040	NJ
COMMUNITY MEDICAL CENTER	310041	NJ
CAPITAL HEALTH MEDICAL CENTER - HOPEWELL	310044	NJ
ENGLEWOOD HOSPITAL AND MEDICAL CENTER	310045	NJ
SHORE MEDICAL CENTER	310047	NJ

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





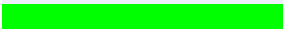
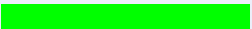
























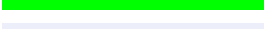
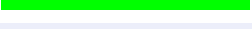
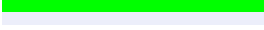
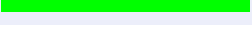


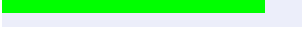
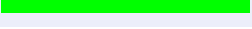


IP-Acute

Based on Spending Breakdown by Claim

\$6855.00	\$7917.00	\$8294.00
\$7168.00	\$7917.00	\$8294.00
\$8088.00	\$7917.00	\$8294.00
\$7481.00	\$7917.00	\$8294.00
\$6831.00	\$7917.00	\$8294.00
\$7355.00	\$7917.00	\$8294.00
\$7399.00	\$7917.00	\$8294.00
\$7540.00	\$7917.00	\$8294.00
\$6891.00	\$7917.00	\$8294.00
\$8720.00	\$7917.00	\$8294.00
\$15385.00	\$7917.00	\$8294.00
\$7202.00	\$7917.00	\$8294.00
\$7752.00	\$7917.00	\$8294.00
\$9532.00	\$7917.00	\$8294.00
\$7358.00	\$7917.00	\$8294.00
\$6489.00	\$7917.00	\$8294.00
\$7347.00	\$7917.00	\$8294.00
\$7517.00	\$7917.00	\$8294.00
\$8608.00	\$7917.00	\$8294.00
\$7832.00	\$7917.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	35.49%		40.06%
	35.87%		40.06%
	39.85%		40.06%
	42.19%		40.06%
	39.71%		40.06%
	35.19%		40.06%
	35.58%		40.06%
	35.97%		40.06%
	41.2%		40.06%
	43.61%		40.06%
	67.12%		40.06%
	38.27%		40.06%
	38.82%		40.06%
	43.27%		40.06%
	37.11%		40.06%
	37.06%		40.06%
	37.24%		40.06%
	41.94%		40.06%
	42.55%		40.06%
	43.79%		40.06%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

SOMERSET MEDICAL CENTER	310048	NJ
SAINT CLARE'S HOSPITAL	310050	NJ
OVERLOOK MEDICAL CENTER	310051	NJ
OCEAN MEDICAL CENTER	310052	NJ
HACKENSACKUMC MOUNTAINSIDE	310054	NJ
VIRTUA MEMORIAL	310057	NJ
BERGEN REGIONAL MEDICAL CENTER	310058	NJ
ST. LUKE'S WARREN HOSPITAL	310060	NJ
LOURDES MEDICAL CENTER OF BURLINGTON COUNTY	310061	NJ
ATLANTICARE REGIONAL MEDICAL CENTER	310064	NJ
SOUTH JERSEY HEALTHCARE - ELMER HOSPITAL	310069	NJ
SAINT PETER'S UNIVERSITY HOSPITAL	310070	NJ
JERSEY SHORE UNIVERSITY MEDICAL CENTER	310073	NJ
LIBERTYHEALTH-JERSEY CITY MEDICAL CENTER CAMPUS	310074	NJ
MONMOUTH MEDICAL CENTER	310075	NJ
SAINT BARNABAS MEDICAL CENTER	310076	NJ
UNDERWOOD - MEMORIAL HOSPITAL	310081	NJ
EAST ORANGE GENERAL HOSPITAL	310083	NJ
KIMBALL MEDICAL CENTER	310084	NJ
KENNEDY UNIVERSITY HOSPITAL - STRATFORD DIV	310086	NJ

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





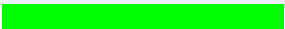
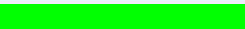
























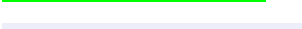
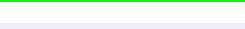
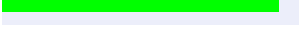
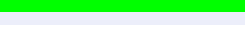


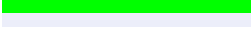
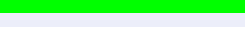


IP-Acute

Based on Spending Breakdown by Claim

	\$7935.00	\$7917.00	\$8294.00
	\$7257.00	\$7917.00	\$8294.00
	\$8312.00	\$7917.00	\$8294.00
	\$7519.00	\$7917.00	\$8294.00
	\$7524.00	\$7917.00	\$8294.00
	\$7680.00	\$7917.00	\$8294.00
	\$5418.00	\$7917.00	\$8294.00
	\$7006.00	\$7917.00	\$8294.00
	\$6745.00	\$7917.00	\$8294.00
	\$8004.00	\$7917.00	\$8294.00
	\$7131.00	\$7917.00	\$8294.00
	\$8027.00	\$7917.00	\$8294.00
	\$9139.00	\$7917.00	\$8294.00
	\$7203.00	\$7917.00	\$8294.00
	\$7310.00	\$7917.00	\$8294.00
	\$9176.00	\$7917.00	\$8294.00
	\$7130.00	\$7917.00	\$8294.00
	\$7393.00	\$7917.00	\$8294.00
	\$6671.00	\$7917.00	\$8294.00
	\$6581.00	\$7917.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	40.06%		40.06%
	38.57%		40.06%
	39.96%		40.06%
	37.02%		40.06%
	37.54%		40.06%
	43.08%		40.06%
	32.29%		40.06%
	38.99%		40.06%
	39.81%		40.06%
	42.31%		40.06%
	42.7%		40.06%
	41.97%		40.06%
	42.09%		40.06%
	37.39%		40.06%
	39.26%		40.06%
	42.3%		40.06%
	42.18%		40.06%
	33.55%		40.06%
	35.27%		40.06%
	38.77%		40.06%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

DIV

MEMORIAL HOSPITAL OF SALEM COUNTY	310091	NJ
CAPITAL HEALTH REGIONAL MEDICAL CENTER	310092	NJ
SAINT MICHAEL'S MEDICAL CENTER, INC	310096	NJ
JFK MEDICAL CTR - ANTHONY M. YELENCSICS COMMUNITY	310108	NJ
ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL HAMILTON	310110	NJ
CENTRASTATE MEDICAL CENTER	310111	NJ
UMDNJ UNIVERSITY HOSPITAL	310119	NJ
BAYSHORE COMMUNITY HOSPITAL	310112	NJ
SOUTHERN OCEAN MEDICAL CENTER	310113	NJ
HACKETTSTOWN REGIONAL MEDICAL CENTER	310115	NJ
MEADOWLANDS HOSPITAL MEDICAL CENTER	310118	NJ
SAINT CLARE'S HOSPITAL/SUSSEX	310120	NJ
UNM HOSPITAL	320001	NM
ST VINCENT HOSPITAL	320002	NM
ALTA VISTA REGIONAL HOSPITAL	320003	NM
GERALD CHAMPION REGIONAL MEDICAL CENTE	320004	NM
SAN JUAN REGIONAL MEDICAL CENTER	320005	NM
EASTERN NEW MEXICO MEDICAL CENTER	320006	NM
LOVELACE MEDICAL CENTER	320009	NM

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$6106.00	\$7917.00	\$8294.00
\$7034.00	\$7917.00	\$8294.00
\$8115.00	\$7917.00	\$8294.00
\$7918.00	\$7917.00	\$8294.00
\$7326.00	\$7917.00	\$8294.00
\$7523.00	\$7917.00	\$8294.00
\$8779.00	\$7917.00	\$8294.00
\$7361.00	\$7917.00	\$8294.00
\$7102.00	\$7917.00	\$8294.00
\$7556.00	\$7917.00	\$8294.00
\$6448.00	\$7917.00	\$8294.00
\$5273.00	\$7917.00	\$8294.00
\$9556.00	\$8054.00	\$8294.00
\$8119.00	\$8054.00	\$8294.00
\$5962.00	\$8054.00	\$8294.00
\$7112.00	\$8054.00	\$8294.00
\$8413.00	\$8054.00	\$8294.00
\$7431.00	\$8054.00	\$8294.00
\$10224.00	\$8054.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	39.11%		40.06%
	34.61%		40.06%
	39.16%		40.06%
	35.13%		40.06%
	39%		40.06%
	39.64%		40.06%
	42.11%		40.06%
	37.77%		40.06%
	39.23%		40.06%
	40.85%		40.06%
	33.75%		40.06%
	44.01%		40.06%
	46.29%		47.25%
	49.14%		47.25%
	47.46%		47.25%
	43.88%		47.25%
	47.76%		47.25%
	43.9%		47.25%
	49.63%		47.25%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

ESPANOLA HOSPITAL	320011	NM
HOLY CROSS HOSPITAL A DIV OF TAOS HEALTH SYSTEMS	320013	NM
GILA REGIONAL MEDICAL CENTER	320016	NM
LOVELACE WOMEN'S HOSPITAL	320017	NM
MEMORIAL MEDICAL CENTER INC	320018	NM
PRESBYTERIAN HOSPITAL	320021	NM
PLAINS REGIONAL MEDICAL CENTER CLOVIS	320022	NM
ARTESIA GENERAL HOSPITAL	320030	NM
LOS ALAMOS MEDICAL CENTER	320033	NM
REHOBOTH MCKINLEY CHRISTIAN HEALTH CARE SERVICES	320038	NM
NORTHERN NAVAJO PHS INDIAN HOSPITAL	320059	NM
ZUNI COMPREHENSIVE COMMUNITY HEALTH CENTER	320060	NM
GALLUP INDIAN MEDICAL CENTER	320061	NM
CROWNPOINT PHS INDIAN HOSPITAL	320062	NM
CARLSBAD MEDICAL CENTER	320063	NM
LEA REGIONAL MEDICAL CENTER	320065	NM
GUADALUPE COUNTY HOSPITAL	320067	NM
ACOMA-CANONCITO-LAGUNA IHS HOSPITAL	320070	NM
LOVELACE WESTSIDE HOSPITAL	320074	NM
ROOSEVELT GENERAL HOSPITAL	320084	NM

IP-Acute

Based on Spending Breakdown by Claim

[illegible]









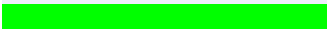
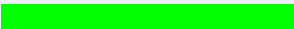






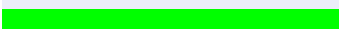
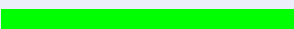
















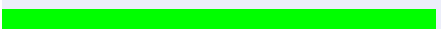
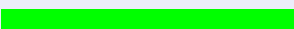




IP-Acute

Based on Spending Breakdown by Claim

	\$6479.00	\$8054.00	\$8294.00
	\$6527.00	\$8054.00	\$8294.00
	\$7239.00	\$8054.00	\$8294.00
	\$7074.00	\$8054.00	\$8294.00
	\$8282.00	\$8054.00	\$8294.00
	\$9069.00	\$8054.00	\$8294.00
	\$6803.00	\$8054.00	\$8294.00
	\$5333.00	\$8054.00	\$8294.00
	\$6794.00	\$8054.00	\$8294.00
	\$6823.00	\$8054.00	\$8294.00
	\$4978.00	\$8054.00	\$8294.00
	\$5780.00	\$8054.00	\$8294.00
	\$5725.00	\$8054.00	\$8294.00
	\$5177.00	\$8054.00	\$8294.00
	\$7109.00	\$8054.00	\$8294.00
	\$6235.00	\$8054.00	\$8294.00
	\$4473.00	\$8054.00	\$8294.00
	\$5608.00	\$8054.00	\$8294.00
	\$7680.00	\$8054.00	\$8294.00
	\$5496.00	\$8054.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	45.44%		47.25%
	51.38%		47.25%
	48.54%		47.25%
	49.2%		47.25%
	46.07%		47.25%
	47.04%		47.25%
	45.42%		47.25%
	37.87%		47.25%
	48.04%		47.25%
	48.83%		47.25%
	52.84%		47.25%
	62.39%		47.25%
	51.47%		47.25%
	53.41%		47.25%
	47.78%		47.25%
	41.95%		47.25%
	61.53%		47.25%
	62.48%		47.25%
	47.08%		47.25%
	43.09%		47.25%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

MOUNTAIN VIEW REGIONAL MEDICAL CENTER	320085	NM
LOVELACE REGIONAL HOSPITAL - ROSWELL	320086	NM
ALBANY MEMORIAL HOSPITAL	330003	NY
KINGSTON HOSPITAL	330004	NY
KALEIDA HEALTH	330005	NY
ST JOSEPH'S MEDICAL CENTER	330006	NY
WYOMING COUNTY COMMUNITY HOSPITAL	330008	NY
BRONX-LEBANON HOSPITAL CENTER - CONCOURSE DIVISION	330009	NY
LOURDES HOSPITAL	330011	NY
ALBANY MEDICAL CENTER HOSPITAL	330013	NY
JAMAICA HOSPITAL MEDICAL CENTER	330014	NY
NEW YORK COMMUNITY HOSPITAL OF BROOKLYN, INC.	330019	NY
VASSAR BROTHERS MEDICAL CENTER	330023	NY
MOUNT SINAI HOSPITAL	330024	NY
NASSAU UNIVERSITY MEDICAL CENTER	330027	NY
RICHMOND UNIVERSITY MEDICAL CENTER	330028	NY
NEWARK-WAYNE COMMUNITY HOSPITAL	330030	NY
CHENANGO MEMORIAL HOSPITAL, INC	330033	NY
LAKESIDE MEMORIAL HOSPITAL	330037	NY

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$8519.00	\$8054.00	\$8294.00
\$7363.00	\$8054.00	\$8294.00
\$7281.00	\$7899.00	\$8294.00
\$5965.00	\$7899.00	\$8294.00
\$8590.00	\$7899.00	\$8294.00
\$6494.00	\$7899.00	\$8294.00
\$6408.00	\$7899.00	\$8294.00
\$6309.00	\$7899.00	\$8294.00
\$7200.00	\$7899.00	\$8294.00
\$9671.00	\$7899.00	\$8294.00
\$6423.00	\$7899.00	\$8294.00
\$6111.00	\$7899.00	\$8294.00
\$8010.00	\$7899.00	\$8294.00
\$9209.00	\$7899.00	\$8294.00
\$6135.00	\$7899.00	\$8294.00
\$6696.00	\$7899.00	\$8294.00
\$6364.00	\$7899.00	\$8294.00
\$6451.00	\$7899.00	\$8294.00
\$5743.00	\$7899.00	\$8294.00

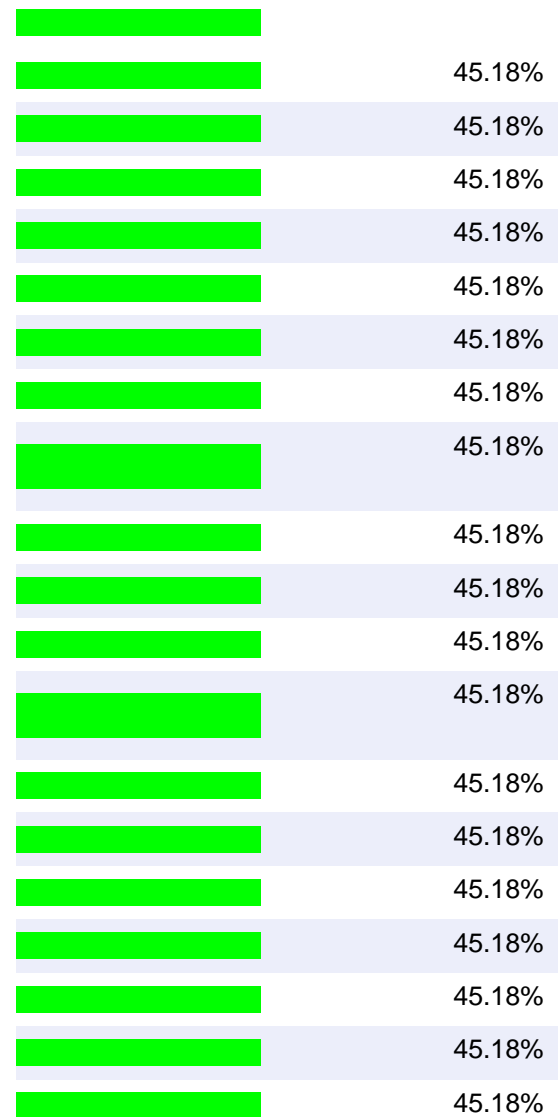
IP-Acute

Based on Spending Breakdown by Claim

	45.16%		47.25%
	46.48%		47.25%
	45.39%		45.22%
	39.66%		45.22%
	48.47%		45.22%
	37.39%		45.22%
	44.36%		45.22%
	43.55%		45.22%
	47.7%		45.22%
	52.72%		45.22%
	42.55%		45.22%
	38.91%		45.22%
	44.82%		45.22%
	48.58%		45.22%
	39.41%		45.22%
	38.64%		45.22%
	42.27%		45.22%
	53.71%		45.22%
	47.28%		45.22%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

NS/LIJ HS SOUTHSIDE HOSPITAL	330043	NY
FAXTON-ST LUKE'S HEALTHCARE	330044	NY
NS/LIJ HS HUNTINGTON HOSPITAL	330045	NY
ST LUKE'S ROOSEVELT HOSPITAL	330046	NY
ST MARY'S HOSPITAL AT AMSTERDAM	330047	NY
NORTHERN DUTCHESS HOSPITAL	330049	NY
MEDINA MEMORIAL HOSPITAL	330053	NY
NEW YORK HOSPITAL QUEENS	330055	NY
BROOKLYN HOSPITAL CENTER AT DOWNTOWN CAMPUS	330056	NY
ST PETERS HOSPITAL	330057	NY
FINGER LAKE HEALTH-GENEVA GENERAL HOSPITAL	330058	NY
MONTEFIORE MEDICAL CENTER	330059	NY
LAWRENCE HOSPITAL CENTER	330061	NY
NEW YORK DOWNTOWN HOSPITAL	330064	NY
NIAGARA FALLS MEMORIAL MEDICAL CENTER	330065	NY
ST FRANCIS HOSPITAL	330067	NY
UNITED MEMORIAL MEDICAL CENTER	330073	NY
F F THOMPSON HOSPITAL	330074	NY
CHS/ SISTERS OF CHARITY HOSPITAL	330078	NY
ADIRONDACK MEDICAL CENTER	330079	NY

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





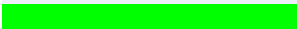
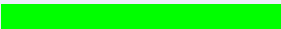
























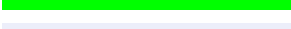
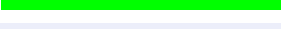
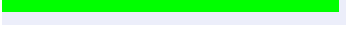
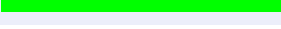


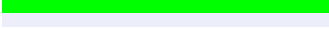
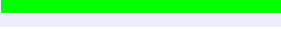


IP-Acute

Based on Spending Breakdown by Claim

	\$8721.00	\$7899.00	\$8294.00
	\$7230.00	\$7899.00	\$8294.00
	\$7553.00	\$7899.00	\$8294.00
	\$7563.00	\$7899.00	\$8294.00
	\$6950.00	\$7899.00	\$8294.00
	\$8412.00	\$7899.00	\$8294.00
	\$5657.00	\$7899.00	\$8294.00
	\$7277.00	\$7899.00	\$8294.00
	\$6720.00	\$7899.00	\$8294.00
	\$9248.00	\$7899.00	\$8294.00
	\$7488.00	\$7899.00	\$8294.00
	\$7915.00	\$7899.00	\$8294.00
	\$6589.00	\$7899.00	\$8294.00
	\$7009.00	\$7899.00	\$8294.00
	\$6411.00	\$7899.00	\$8294.00
	\$7458.00	\$7899.00	\$8294.00
	\$7230.00	\$7899.00	\$8294.00
	\$7477.00	\$7899.00	\$8294.00
	\$8465.00	\$7899.00	\$8294.00
	\$8013.00	\$7899.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.87%		45.22%
	40.52%		45.22%
	41.79%		45.22%
	44.37%		45.22%
	44.45%		45.22%
	46.33%		45.22%
	43.06%		45.22%
	40.81%		45.22%
	41.32%		45.22%
	51.91%		45.22%
	49.35%		45.22%
	43.06%		45.22%
	38.54%		45.22%
	45%		45.22%
	47.81%		45.22%
	41.07%		45.22%
	48.94%		45.22%
	47.31%		45.22%
	46.55%		45.22%
	52.4%		45.22%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

LINCOLN MEDICAL & MENTAL HEALTH CENTER	330080	NY
ALICE HYDE MEDICAL CENTER	330084	NY
AURELIA OSBORN FOX MEMORIAL HOSPITAL	330085	NY
MOUNT VERNON HOSPITAL	330086	NY
EASTERN LONG ISLAND HOSPITAL	330088	NY
ARNOT OGDEN MEDICAL CENTER	330090	NY
COLUMBIA MEMORIAL HOSPITAL	330094	NY
JONES MEMORIAL HOSPITAL	330096	NY
NY EYE AND EAR INFIRMARY	330100	NY
KENMORE MERCY HOSPITAL	330102	NY
NEW YORK-PRESBYTERIAN HOSPITAL	330101	NY
OLEAN GENERAL HOSPITAL	330103	NY
NYACK HOSPITAL	330104	NY
NS/LIJ HS-NORTH SHORE UNIVERSITY HOSPITAL AT MANHASSET	330106	NY
PECONIC BAY MEDICAL CENTER	330107	NY
ST JOSEPH'S HOSPITAL, INC	330108	NY
BERTRAND CHAFFEE HOSPITAL	330111	NY
ONEIDA HEALTHCARE CENTER	330115	NY
NS/LIJ HS LENOX HILL HOSPITAL	330119	NY
ROCHESTER GENERAL HOSPITAL	330125	NY
ORANGE REGIONAL MEDICAL CENTER	330126	NY

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

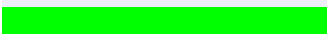
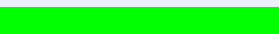


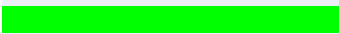
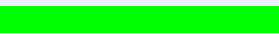














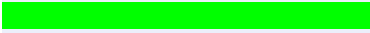
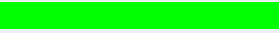






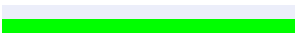
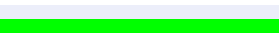
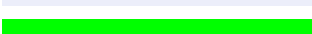
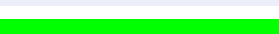
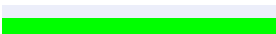
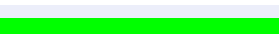
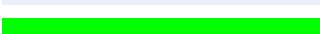
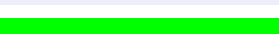
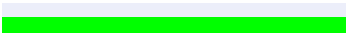
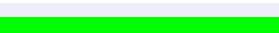
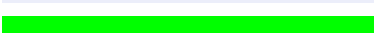
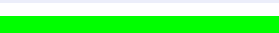
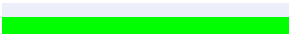
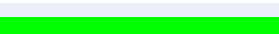
IP-Acute

Based on Spending Breakdown by Claim

\$5652.00	\$7899.00	\$8294.00
\$6345.00	\$7899.00	\$8294.00
\$6133.00	\$7899.00	\$8294.00
\$7053.00	\$7899.00	\$8294.00
\$5588.00	\$7899.00	\$8294.00
\$8149.00	\$7899.00	\$8294.00
\$6588.00	\$7899.00	\$8294.00
\$6672.00	\$7899.00	\$8294.00
\$5464.00	\$7899.00	\$8294.00
\$8126.00	\$7899.00	\$8294.00
\$10051.00	\$7899.00	\$8294.00
\$6417.00	\$7899.00	\$8294.00
\$6924.00	\$7899.00	\$8294.00
\$8453.00	\$7899.00	\$8294.00
\$6710.00	\$7899.00	\$8294.00
\$5745.00	\$7899.00	\$8294.00
\$5486.00	\$7899.00	\$8294.00
\$6253.00	\$7899.00	\$8294.00
\$8709.00	\$7899.00	\$8294.00
\$8803.00	\$7899.00	\$8294.00
\$7367.00	\$7899.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.17%		45.22%
	52.38%		45.22%
	48.09%		45.22%
	38.71%		45.22%
	45.18%		45.22%
	51.47%		45.22%
	40.17%		45.22%
	50.98%		45.22%
	53.06%		45.22%
	43.32%		45.22%
	52.22%		45.22%
	44.39%		45.22%
	37.61%		45.22%
	46.18%		45.22%
	41.63%		45.22%
	43.99%		45.22%
	38.83%		45.22%
	45.32%		45.22%
	49.25%		45.22%
	52.9%		45.22%
	40.86%		45.22%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

JACOBI MEDICAL CENTER	330127	NY
ELMHURST HOSPITAL CENTER	330128	NY
TLC HEALTH NETWORK	330132	NY
BON SECOURS COMMUNITY HOSPITAL	330135	NY
BASSETT HEALTHCARE	330136	NY
ST JOSEPH'S HOSPITAL HEALTH CENTER	330140	NY
BROOKHAVEN MEMORIAL HOSPITAL MEDICAL CENTER	330141	NY
IRA DAVENPORT MEMORIAL HOSPITAL, INC	330144	NY
ST JAMES MERCY HOSPITAL	330151	NY
ELLIS HOSPITAL	330153	NY
SAMARITAN MEDICAL CENTER	330157	NY
GOOD SAMARITAN HOSPITAL OF SUFFERN	330158	NY
STATEN ISLAND UNIVERSITY HOSPITAL	330160	NY
NORTHERN WESTCHESTER HOSPITAL	330162	NY
EASTERN NIAGARA HOSPITAL	330163	NY
HIGHLAND HOSPITAL	330164	NY
WINTHROP-UNIVERSITY HOSPITAL	330167	NY
BETH ISRAEL MEDICAL CENTER - PETRIE CAMPUS	330169	NY
CORTLAND REGIONAL MEDICAL CENTER, INC	330175	NY
EDWARD JOHN NOBLE HOSPITAL OF GOUVERNEUR	330177	NY

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





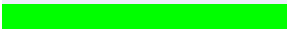
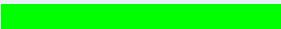






















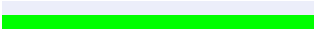
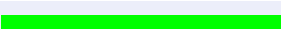
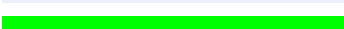
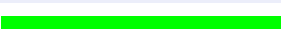
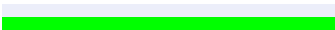
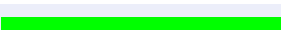
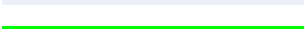
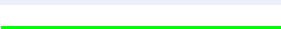




IP-Acute

Based on Spending Breakdown by Claim

\$6791.00	\$7899.00	\$8294.00
\$6012.00	\$7899.00	\$8294.00
\$6363.00	\$7899.00	\$8294.00
\$6633.00	\$7899.00	\$8294.00
\$8655.00	\$7899.00	\$8294.00
\$8901.00	\$7899.00	\$8294.00
\$6905.00	\$7899.00	\$8294.00
\$5201.00	\$7899.00	\$8294.00
\$6818.00	\$7899.00	\$8294.00
\$7743.00	\$7899.00	\$8294.00
\$7653.00	\$7899.00	\$8294.00
\$8292.00	\$7899.00	\$8294.00
\$7323.00	\$7899.00	\$8294.00
\$7817.00	\$7899.00	\$8294.00
\$6229.00	\$7899.00	\$8294.00
\$7926.00	\$7899.00	\$8294.00
\$8416.00	\$7899.00	\$8294.00
\$7148.00	\$7899.00	\$8294.00
\$6076.00	\$7899.00	\$8294.00
\$5158.00	\$7899.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	44.95%		45.22%
	42.04%		45.22%
	40.69%		45.22%
	44.68%		45.22%
	50.29%		45.22%
	50.56%		45.22%
	37.08%		45.22%
	55.99%		45.22%
	47.85%		45.22%
	47.03%		45.22%
	51.39%		45.22%
	41.59%		45.22%
	43.12%		45.22%
	44.65%		45.22%
	44.19%		45.22%
	48.6%		45.22%
	47.3%		45.22%
	42.88%		45.22%
	44.59%		45.22%
	53.82%		45.22%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

GOUVERNEUR

SAMARITAN HOSPITAL	330180	NY
NS/LIJ HS-NORTH SHORE UNIV HOSP AT GLEN COVE	330181	NY
ST FRANCIS HOSPITAL - THE HEART CENTER	330182	NY
SOUND SHORE MEDICAL CENTER OF WESTSCHESTER	330184	NY
JOHN T MATHER MEMORIAL HOSPITAL OF PORT JEFFERSON	330185	NY
MOUNT ST. MARY'S HOSPITAL & HEALTH CENTER	330188	NY
GLENS FALLS HOSPITAL	330191	NY
FLUSHING HOSPITAL MEDICAL CENTER	330193	NY
MAIMONIDES MEDICAL CENTER	330194	NY
NS/LIJ HS LONG ISLAND JEWISH MEDICAL CENTER	330195	NY
CONEY ISLAND HOSPITAL	330196	NY
CANTON-POTSDAM HOSPITAL	330197	NY
SOUTH NASSAU COMMUNITIES HOSPITAL	330198	NY
METROPOLITAN HOSPITAL CENTER	330199	NY
KINGSBROOK JEWISH MEDICAL CENTER	330201	NY
KINGS COUNTY HOSPITAL CENTER	330202	NY
CROUSE HOSPITAL	330203	NY
BELLEVUE HOSPITAL CENTER	330204	NY

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7383.00	\$7899.00	\$8294.00
\$7165.00	\$7899.00	\$8294.00
\$11877.00	\$7899.00	\$8294.00
\$7335.00	\$7899.00	\$8294.00
\$7140.00	\$7899.00	\$8294.00
\$6905.00	\$7899.00	\$8294.00
\$7368.00	\$7899.00	\$8294.00
\$7395.00	\$7899.00	\$8294.00
\$8599.00	\$7899.00	\$8294.00
\$8373.00	\$7899.00	\$8294.00
\$7260.00	\$7899.00	\$8294.00
\$6431.00	\$7899.00	\$8294.00
\$7108.00	\$7899.00	\$8294.00
\$5623.00	\$7899.00	\$8294.00
\$7383.00	\$7899.00	\$8294.00
\$6445.00	\$7899.00	\$8294.00
\$8077.00	\$7899.00	\$8294.00
\$6921.00	\$7899.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	45.39%		45.22%
	35.2%		45.22%
	57.17%		45.22%
	38.58%		45.22%
	41.93%		45.22%
	43.79%		45.22%
	45.99%		45.22%
	37.78%		45.22%
	46.55%		45.22%
	46.56%		45.22%
	39.92%		45.22%
	52.6%		45.22%
	40.08%		45.22%
	45.96%		45.22%
	35.78%		45.22%
	44.58%		45.22%
	47.28%		45.22%
	46.19%		45.22%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

ST ANTHONY COMMUNITY HOSPITAL	330205	NY
ST JOHN'S RIVERSIDE HOSPITAL	330208	NY
CLAXTON-HEPBURN MEDICAL CENTER	330211	NY
LEWIS COUNTY GENERAL HOSPITAL	330213	NY
NEW YORK UNIVERSITY LANGONE MEDICAL CENTER	330214	NY
ROME MEMORIAL HOSPITAL, INC	330215	NY
OSWEGO HOSPITAL	330218	NY
ERIE COUNTY MEDICAL CENTER	330219	NY
WYCKOFF HEIGHTS MEDICAL CENTER	330221	NY
SARATOGA HOSPITAL	330222	NY
MASSENA MEMORIAL HOSPITAL	330223	NY
BENEDICTINE HOSPITAL	330224	NY
LONG BEACH MEDICAL CENTER	330225	NY
UNITY HOSPITAL	330226	NY
BROOKS MEMORIAL HOSPITAL	330229	NY
QUEENS HOSPITAL CENTER	330231	NY
SETON HEALTH SYSTEM-ST MARY'S CAMPUS	330232	NY
BROOKDALE HOSPITAL MEDICAL CENTER	330233	NY
WESTCHESTER MEDICAL CENTER	330234	NY
AUBURN COMMUNITY HOSPITAL	330235	NY
NEW YORK METHODIST HOSPITAL	330236	NY

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient





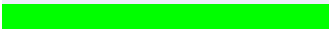
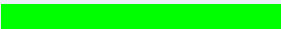
































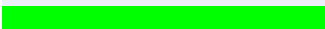
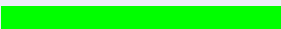


IP-Acute

Based on Spending Breakdown by Claim

\$7395.00	\$7899.00	\$8294.00
\$6779.00	\$7899.00	\$8294.00
\$7110.00	\$7899.00	\$8294.00
\$6408.00	\$7899.00	\$8294.00
\$10458.00	\$7899.00	\$8294.00
\$6267.00	\$7899.00	\$8294.00
\$6046.00	\$7899.00	\$8294.00
\$8884.00	\$7899.00	\$8294.00
\$6839.00	\$7899.00	\$8294.00
\$7350.00	\$7899.00	\$8294.00
\$5429.00	\$7899.00	\$8294.00
\$9309.00	\$7899.00	\$8294.00
\$5954.00	\$7899.00	\$8294.00
\$8623.00	\$7899.00	\$8294.00
\$7258.00	\$7899.00	\$8294.00
\$5925.00	\$7899.00	\$8294.00
\$7153.00	\$7899.00	\$8294.00
\$7510.00	\$7899.00	\$8294.00
\$11261.00	\$7899.00	\$8294.00
\$6496.00	\$7899.00	\$8294.00
\$7395.00	\$7899.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.92%		45.22%
	40.52%		45.22%
	46.71%		45.22%
	53.8%		45.22%
	50.2%		45.22%
	42.75%		45.22%
	39.02%		45.22%
	49.66%		45.22%
	42.85%		45.22%
	50.64%		45.22%
	43.9%		45.22%
	49.62%		45.22%
	35.81%		45.22%
	50.84%		45.22%
	41.48%		45.22%
	45.18%		45.22%
	45.99%		45.22%
	42.42%		45.22%
	51%		45.22%
	45.93%		45.22%
	42.09%		45.22%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

NICHOLAS H NOYES MEMORIAL HOSPITAL	330238	NY
WOMAN'S CHRISTIAN ASSOCIATION	330239	NY
HARLEM HOSPITAL CENTER	330240	NY
UNIVERSITY HOSPITAL S U N Y HEALTH SCIENCE CENTER	330241	NY
ST ELIZABETH MEDICAL CENTER	330245	NY
CHSLI ST CHARLES HOSPITAL	330246	NY
COMMUNITY MEMORIAL HOSPITAL, INC	330249	NY
CHAMPLAIN VALLEY PHYSICIANS HOSPITAL MEDICAL CTR	330250	NY
MERCY MEDICAL CENTER	330259	NY
PHELPS MEMORIAL HOSPITAL ASSN	330261	NY
CARTHAGE AREA HOSPITAL, INC	330263	NY
ST LUKE'S CORNWALL HOSPITAL	330264	NY
CLIFTON SPRINGS HOSPITAL AND CLINIC	330265	NY
HUDSON VALLEY HOSPITAL CENTER	330267	NY
COBLESKILL REGIONAL HOSPITAL	330268	NY
HOSPITAL FOR SPECIAL SURGERY	330270	NY
PUTNAM HOSPITAL CENTER	330273	NY
NATHAN LITTAUER HOSPITAL	330276	NY
CORNING HOSPITAL	330277	NY
CATHOLIC HEALTH SYSTEM / MERCY HOSPITAL OF BUFFALO	330279	NY

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





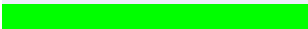
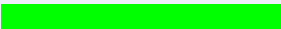


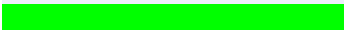
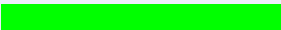


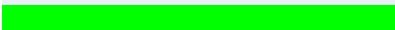
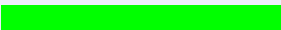






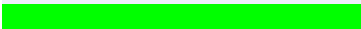
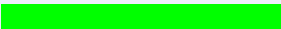






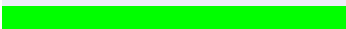
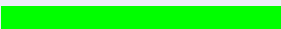


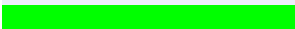
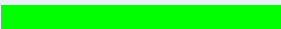






IP-Acute

Based on Spending Breakdown by Claim

\$6639.00	\$7899.00	\$8294.00
\$6607.00	\$7899.00	\$8294.00
\$5988.00	\$7899.00	\$8294.00
\$9113.00	\$7899.00	\$8294.00
\$8738.00	\$7899.00	\$8294.00
\$7651.00	\$7899.00	\$8294.00
\$9398.00	\$7899.00	\$8294.00
\$8216.00	\$7899.00	\$8294.00
\$7611.00	\$7899.00	\$8294.00
\$7116.00	\$7899.00	\$8294.00
\$5282.00	\$7899.00	\$8294.00
\$7665.00	\$7899.00	\$8294.00
\$7094.00	\$7899.00	\$8294.00
\$7626.00	\$7899.00	\$8294.00
\$4944.00	\$7899.00	\$8294.00
\$13296.00	\$7899.00	\$8294.00
\$7694.00	\$7899.00	\$8294.00
\$5725.00	\$7899.00	\$8294.00
\$6499.00	\$7899.00	\$8294.00
\$8447.00	\$7899.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	49.71%		45.22%
	42.29%		45.22%
	43.41%		45.22%
	49.08%		45.22%
	48.57%		45.22%
	43.91%		45.22%
	55.87%		45.22%
	52.26%		45.22%
	36.95%		45.22%
	42.23%		45.22%
	51.17%		45.22%
	42.32%		45.22%
	50.07%		45.22%
	39.27%		45.22%
	49.15%		45.22%
	53.11%		45.22%
	41.67%		45.22%
	47.4%		45.22%
	44.67%		45.22%
	47.42%		45.22%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

OF BUFFALO

STRONG MEMORIAL HOSPITAL	330285	NY
GOOD SAMARITAN HOSPITAL MEDICAL CENTER	330286	NY
WHITE PLAINS HOSPITAL CENTER	330304	NY
LUTHERAN MEDICAL CENTER	330306	NY
CAYUGA MEDICAL CENTER AT ITHACA	330307	NY
NEW YORK WESTCHESTER SQUARE MEDICAL CENTER	330316	NY
NS/LIJ HS PLAINVIEW HOSPITAL	330331	NY
CHSLI ST JOSEPH HOSPITAL	330332	NY
SOUTHAMPTON HOSPITAL	330340	NY
SUNY/DOWNSTATE UNIVERSITY HOSPITAL OF BROOKLYN	330350	NY
NS/LIJ HS-NORTH SHORE UNIV HOSP AT FOREST HILLS	330353	NY
FRANKLIN HOSPITAL	330372	NY
NORTH CENTRAL BRONX HOSPITAL	330385	NY
CATSKILL REGIONAL MEDICAL CENTER	330386	NY
SUNY/STONY BROOK UNIVERSITY HOSPITAL	330393	NY
UNITED HEALTH SERVICES HOSPITALS, INC	330394	NY
ST JOHN'S EPISCOPAL HOSPITAL AT SOUTH SHORE	330395	NY
WOODHULL MEDICAL AND MENTAL HEALTH	330396	NY

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$9191.00	\$7899.00	\$8294.00
\$7033.00	\$7899.00	\$8294.00
\$6973.00	\$7899.00	\$8294.00
\$7185.00	\$7899.00	\$8294.00
\$7849.00	\$7899.00	\$8294.00
\$7105.00	\$7899.00	\$8294.00
\$7130.00	\$7899.00	\$8294.00
\$6874.00	\$7899.00	\$8294.00
\$5760.00	\$7899.00	\$8294.00
\$7442.00	\$7899.00	\$8294.00
\$6552.00	\$7899.00	\$8294.00
\$6534.00	\$7899.00	\$8294.00
\$5470.00	\$7899.00	\$8294.00
\$7244.00	\$7899.00	\$8294.00
\$8511.00	\$7899.00	\$8294.00
\$9251.00	\$7899.00	\$8294.00
\$6817.00	\$7899.00	\$8294.00
\$6625.00	\$7899.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	51.42%		45.22%
	41.24%		45.22%
	40.65%		45.22%
	38.01%		45.22%
	50.22%		45.22%
	36.26%		45.22%
	38.87%		45.22%
	35.47%		45.22%
	41.75%		45.22%
	45.9%		45.22%
	38.08%		45.22%
	37.1%		45.22%
	43.17%		45.22%
	39.29%		45.22%
	49.55%		45.22%
	50.85%		45.22%
	36.15%		45.22%
	45.44%		45.22%

IP-Acute

Based on Spending Breakdown by Claim

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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

CENTER		
INTERFAITH MEDICAL CENTER	330397	NY
ST BARNABAS HOSPITAL	330399	NY
ST CATHERINE OF SIENA HOSPITAL	330401	NY
CAROLINAS MEDICAL CENTER-NORTHEAST	340001	NC
MEMORIAL MISSION HOSPITAL AND ASHEVILLE SURGERY CE	340002	NC
NORTHERN HOSPITAL OF SURRY COUNTY	340003	NC
HIGH POINT REGIONAL HEALTH SYSTEM	340004	NC
SCOTLAND MEMORIAL HOSPITAL	340008	NC
WAYNE MEMORIAL HOSPITAL	340010	NC
BLUE RIDGE REGIONAL HOSPITAL	340011	NC
RUTHERFORD HOSPITAL INC	340013	NC
FORSYTH MEMORIAL HOSPITAL	340014	NC
ROWAN REGIONAL MEDICAL CENTER	340015	NC
MEDWEST HARRIS	340016	NC
MARGARET R PARDEE MEMORIAL HOSPITAL	340017	NC
CENTRAL CAROLINA HOSPITAL	340020	NC
CLEVELAND REGIONAL MEDICAL CENTER	340021	NC
PARK RIDGE HEALTH	340023	NC
SAMPSON REGIONAL MEDICAL CENTER	340024	NC
LENOIR MEMORIAL HOSPITAL	340027	NC

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

	\$6714.00	\$7899.00	\$8294.00
	\$6267.00	\$7899.00	\$8294.00
	\$6933.00	\$7899.00	\$8294.00
	\$8523.00	\$8383.00	\$8294.00
	\$9579.00	\$8383.00	\$8294.00
	\$6900.00	\$8383.00	\$8294.00
	\$7885.00	\$8383.00	\$8294.00
	\$6820.00	\$8383.00	\$8294.00
	\$8034.00	\$8383.00	\$8294.00
	\$5709.00	\$8383.00	\$8294.00
	\$6717.00	\$8383.00	\$8294.00
	\$8905.00	\$8383.00	\$8294.00
	\$7970.00	\$8383.00	\$8294.00
	\$7532.00	\$8383.00	\$8294.00
	\$7915.00	\$8383.00	\$8294.00
	\$6104.00	\$8383.00	\$8294.00
	\$7423.00	\$8383.00	\$8294.00
	\$7281.00	\$8383.00	\$8294.00
	\$6788.00	\$8383.00	\$8294.00
	\$7230.00	\$8383.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.56%		45.22%
	44.44%		45.22%
	38.9%		45.22%
	47.14%		48%
	49.44%		48%
	47.78%		48%
	45.75%		48%
	47.6%		48%
	45.06%		48%
	42.26%		48%
	43.41%		48%
	48.11%		48%
	42.22%		48%
	45.18%		48%
	45.91%		48%
	43.81%		48%
	47.02%		48%
	42.69%		48%
	42.57%		48%
	45.03%		48%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

CAPE FEAR VALLEY MEDICAL CENTER	340028	NC
DUKE UNIVERSITY HOSPITAL	340030	NC
GASTON MEMORIAL HOSPITAL	340032	NC
FRANKLIN REGIONAL MEDICAL CENTER	340036	NC
KINGS MOUNTAIN HOSPITAL	340037	NC
IREDELL MEMORIAL HOSPITAL INC	340039	NC
VIDANT MEDICAL CENTER	340040	NC
CALDWELL MEMORIAL HOSPITAL	340041	NC
ONslow MEMORIAL HOSPITAL	340042	NC
NORTH CAROLINA BAPTIST HOSPITAL	340047	NC
NORTH CAROLINA SPECIALTY HOSPITAL	340049	NC
SOUTHEASTERN REGIONAL MEDICAL CENTER	340050	NC
WATAUGA MEDICAL CENTER	340051	NC
PRESBYTERIAN HOSPITAL	340053	NC
VALDESE GENERAL HOSPITAL INC	340055	NC
MOREHEAD MEMORIAL HOSPITAL	340060	NC
UNIVERSITY OF NORTH CAROLINA HOSPITAL	340061	NC
WILKES REGIONAL MEDICAL CENTER	340064	NC
COLUMBUS REGIONAL HEALTHCARE SYSTEM	340068	NC
WAKEMED, RALEIGH CAMPUS	340069	NC
ALAMANCE REGIONAL MEDICAL CENTER	340070	NC
BETSY JOHNSON REGIONAL HOSPITAL	340071	NC

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





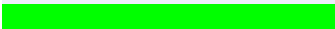
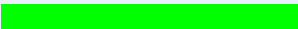
















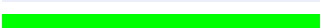
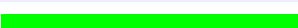
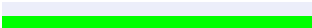
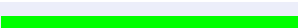
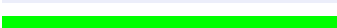
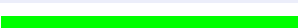
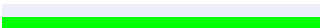
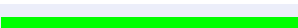
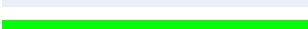
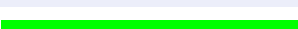
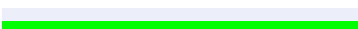
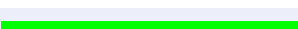
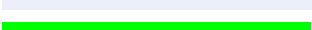
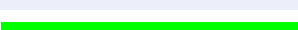
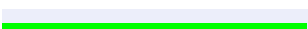
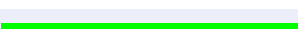
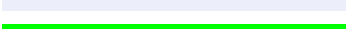
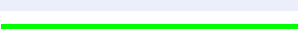


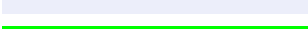
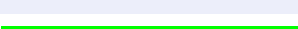
IP-Acute

Based on Spending Breakdown by Claim

\$8295.00	\$8383.00	\$8294.00
\$11665.00	\$8383.00	\$8294.00
\$8130.00	\$8383.00	\$8294.00
\$5632.00	\$8383.00	\$8294.00
\$6374.00	\$8383.00	\$8294.00
\$7512.00	\$8383.00	\$8294.00
\$9537.00	\$8383.00	\$8294.00
\$8403.00	\$8383.00	\$8294.00
\$6597.00	\$8383.00	\$8294.00
\$9920.00	\$8383.00	\$8294.00
\$12111.00	\$8383.00	\$8294.00
\$6869.00	\$8383.00	\$8294.00
\$6928.00	\$8383.00	\$8294.00
\$8786.00	\$8383.00	\$8294.00
\$7815.00	\$8383.00	\$8294.00
\$6100.00	\$8383.00	\$8294.00
\$10208.00	\$8383.00	\$8294.00
\$6699.00	\$8383.00	\$8294.00
\$6987.00	\$8383.00	\$8294.00
\$9205.00	\$8383.00	\$8294.00
\$7531.00	\$8383.00	\$8294.00
\$5951.00	\$8383.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	48.04%		48%
	53.6%		48%
	47.43%		48%
	38.83%		48%
	46.07%		48%
	46.6%		48%
	52.17%		48%
	46.08%		48%
	45.97%		48%
	49.82%		48%
	58.69%		48%
	45.43%		48%
	44.26%		48%
	47.88%		48%
	45.67%		48%
	43.45%		48%
	50.79%		48%
	43.87%		48%
	43.21%		48%
	48.99%		48%
	45.36%		48%
	43.53%		48%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

DUKE HEALTH RALEIGH HOSPITAL	340073	NC
GRACE HOSPITAL INC	340075	NC
ANSON COMMUNITY HOSPITAL	340084	NC
THOMASVILLE MEDICAL CENTER	340085	NC
THE MCDOWELL HOSPITAL	340087	NC
JOHNSTON MEMORIAL HOSPITAL	340090	NC
MOSES H CONE MEMORIAL HOSPITAL, THE	340091	NC
LEXINGTON MEMORIAL HOSPITAL INC	340096	NC
HUGH CHATHAM MEMORIAL HOSPITAL	340097	NC
CAROLINAS MED CENTER-MERCY	340098	NC
VIDANT ROANOKE CHOWAN HOSPITAL	340099	NC
SANDHILLS REGIONAL MEDICAL CENTER	340106	NC
VIDANT EDGECOMBE HOSPITAL	340107	NC
ALBEMARLE HOSPITAL AUTHORITY	340109	NC
CAROLINAS MEDICAL CENTER/BEHAV HEALTH	340113	NC
REX HOSPITAL	340114	NC
FIRSTHEALTH MOORE REGIONAL HOSPITAL	340115	NC
FRYE REGIONAL MEDICAL CENTER	340116	NC
STANLY REGIONAL MEDICAL CENTER	340119	NC
VIDANT DUPLIN HOSPITAL	340120	NC
RANDOLPH HOSPITAL	340123	NC

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$10296.00	\$8383.00	\$8294.00
\$7040.00	\$8383.00	\$8294.00
\$7034.00	\$8383.00	\$8294.00
\$6745.00	\$8383.00	\$8294.00
\$6280.00	\$8383.00	\$8294.00
\$7303.00	\$8383.00	\$8294.00
\$8333.00	\$8383.00	\$8294.00
\$6512.00	\$8383.00	\$8294.00
\$6744.00	\$8383.00	\$8294.00
\$8888.00	\$8383.00	\$8294.00
\$6712.00	\$8383.00	\$8294.00
\$6049.00	\$8383.00	\$8294.00
\$6347.00	\$8383.00	\$8294.00
\$7611.00	\$8383.00	\$8294.00
\$10387.00	\$8383.00	\$8294.00
\$8839.00	\$8383.00	\$8294.00
\$8149.00	\$8383.00	\$8294.00
\$8888.00	\$8383.00	\$8294.00
\$7670.00	\$8383.00	\$8294.00
\$5566.00	\$8383.00	\$8294.00
\$7840.00	\$8383.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	51.31%		48%
	46.26%		48%
	42.99%		48%
	44.36%		48%
	42.2%		48%
	42.61%		48%
	46.42%		48%
	42.39%		48%
	44.65%		48%
	47.41%		48%
	43.59%		48%
	48.75%		48%
	41.38%		48%
	46.66%		48%
	52.13%		48%
	50.8%		48%
	50.32%		48%
	50.82%		48%
	46.77%		48%
	43.84%		48%
	42.58%		48%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
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	45.18%
	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

WILSON MEDICAL CENTER	340126	NC
GRANVILLE MEDICAL CENTER	340127	NC
LAKE NORMAN REGIONAL MEDICAL CENTER	340129	NC
CAROLINAS MEDICAL CENTER-UNION	340130	NC
CAROLINA EAST MEDICAL CENTER	340131	NC
MARIA PARHAM MEDICAL CENTER	340132	NC
MARTIN GENERAL HOSPITAL	340133	NC
NEW HANOVER REGIONAL MEDICAL CENTER	340141	NC
CARTERET GENERAL HOSPITAL	340142	NC
CATAWBA VALLEY MEDICAL CENTER	340143	NC
DAVIS REGIONAL MEDICAL CENTER	340144	NC
CAROLINAS MEDICAL CENTER-LINCOLN	340145	NC
NASH GENERAL HOSPITAL	340147	NC
MEDICAL PARK HOSPITAL	340148	NC
HALIFAX REGIONAL MEDICAL CENTER INC	340151	NC
PRESBYTERIAN-ORTHOPAEDIC HOSPITAL	340153	NC
DURHAM REGIONAL HOSPITAL	340155	NC
CHEROKEE INDIAN HOSPITAL AUTHORITY	340156	NC
BRUNSWICK COMMUNITY HOSPITAL	340158	NC
PERSON MEMORIAL HOSPITAL	340159	NC
MURPHY MEDICAL CENTER INC	340160	NC

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7139.00	\$8383.00	\$8294.00
\$7456.00	\$8383.00	\$8294.00
\$7751.00	\$8383.00	\$8294.00
\$7314.00	\$8383.00	\$8294.00
\$8976.00	\$8383.00	\$8294.00
\$6346.00	\$8383.00	\$8294.00
\$5579.00	\$8383.00	\$8294.00
\$9560.00	\$8383.00	\$8294.00
\$7142.00	\$8383.00	\$8294.00
\$8914.00	\$8383.00	\$8294.00
\$6628.00	\$8383.00	\$8294.00
\$7134.00	\$8383.00	\$8294.00
\$7403.00	\$8383.00	\$8294.00
\$8587.00	\$8383.00	\$8294.00
\$6777.00	\$8383.00	\$8294.00
\$14038.00	\$8383.00	\$8294.00
\$8439.00	\$8383.00	\$8294.00
\$5307.00	\$8383.00	\$8294.00
\$7084.00	\$8383.00	\$8294.00
\$6450.00	\$8383.00	\$8294.00
\$7458.00	\$8383.00	\$8294.00

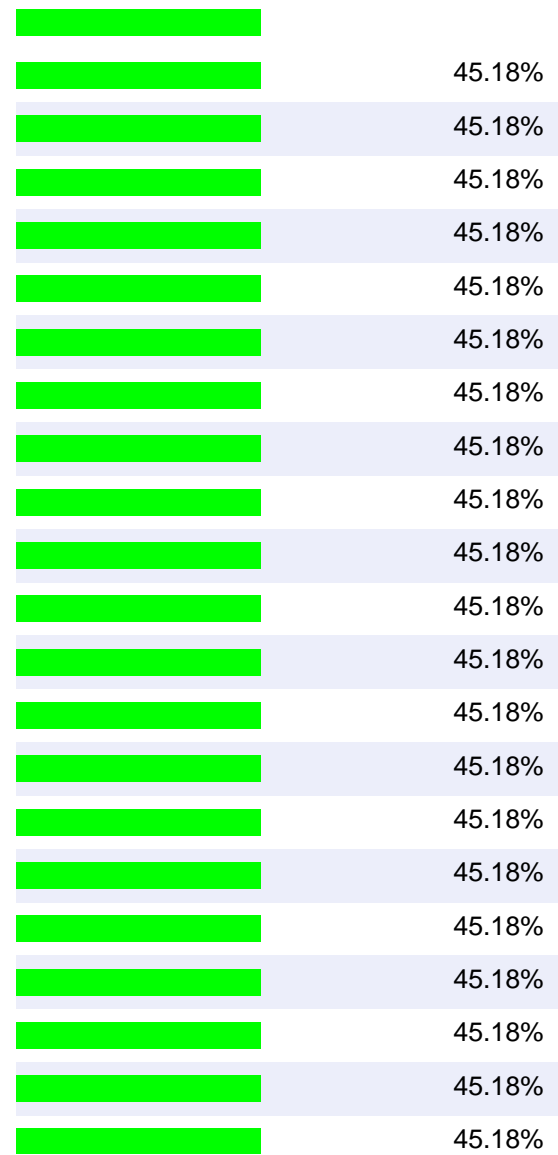
IP-Acute

Based on Spending Breakdown by Claim

	42.51%		48%
	48.22%		48%
	45.13%		48%
	43.84%		48%
	53.16%		48%
	42.74%		48%
	42.92%		48%
	50.22%		48%
	48.42%		48%
	47.07%		48%
	48.46%		48%
	42.15%		48%
	46.51%		48%
	67.51%		48%
	43.55%		48%
	59.28%		48%
	45.65%		48%
	59.81%		48%
	47.53%		48%
	48.5%		48%
	49.68%		48%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

CAROLINAS MED CTR-UNIVERSITY	340166	NC
PRESBYTERIAN HOSPITAL MATTHEWS	340171	NC
WAKEMED, CARY HOSPITAL	340173	NC
PRESBYTERIAN HOSPITAL HUNTERSVILLE	340183	NC
MEDWEST HAYWOOD	340184	NC
SANFORD HEALTH SYSTEM	350011	ND
VIDANT BEAUFORT HOSPITAL	340186	NC
ST ALEXIUS MEDICAL CENTER	350002	ND
TRINITY HOSPITALS	350006	ND
MEDCENTER ONE	350015	ND
ALTRU HOSPITAL	350019	ND
P H S INDIAN HOSP AT BELCOURT-QUENTIN N BURDICK	350063	ND
ESSENTIA HEALTH	350070	ND
MERCY HOSPITAL ANDERSON	360001	OH
SAMARITAN HOSPITAL - PEOPLES HOSPITAL	360002	OH
UNIVERSITY HOSPITAL, INC	360003	OH
RIVERSIDE METHODIST HOSPITAL	360006	OH
SOUTHERN OHIO MEDICAL CENTER	360008	OH
LIMA MEMORIAL HEALTH SYSTEM	360009	OH
UNION HOSPITAL	360010	OH

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$7102.00	\$8383.00	\$8294.00
\$6959.00	\$8383.00	\$8294.00
\$7459.00	\$8383.00	\$8294.00
\$8040.00	\$8383.00	\$8294.00
\$7254.00	\$8383.00	\$8294.00
\$9464.00	\$9190.00	\$8294.00
\$6731.00	\$8383.00	\$8294.00
\$10312.00	\$9190.00	\$8294.00
\$8697.00	\$9190.00	\$8294.00
\$9804.00	\$9190.00	\$8294.00
\$8613.00	\$9190.00	\$8294.00
\$4259.00	\$9190.00	\$8294.00
\$9054.00	\$9190.00	\$8294.00
\$7793.00	\$8205.00	\$8294.00
\$7608.00	\$8205.00	\$8294.00
\$8811.00	\$8205.00	\$8294.00
\$8834.00	\$8205.00	\$8294.00
\$7846.00	\$8205.00	\$8294.00
\$8320.00	\$8205.00	\$8294.00
\$7113.00	\$8205.00	\$8294.00

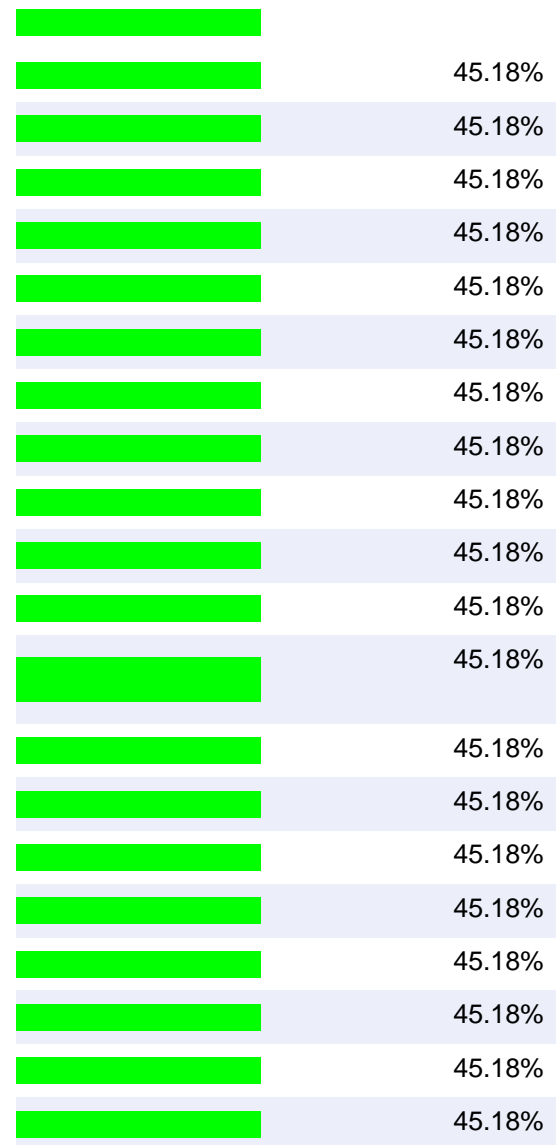
IP-Acute

Based on Spending Breakdown by Claim

	43.88%		48%
	44.06%		48%
	44.96%		48%
	48.28%		48%
	48.21%		48%
	50.11%		50.99%
	45.82%		48%
	55.55%		50.99%
	50.01%		50.99%
	52.97%		50.99%
	50.28%		50.99%
	63.03%		50.99%
	48.3%		50.99%
	44.12%		44.04%
	41.93%		44.04%
	44.97%		44.04%
	46.89%		44.04%
	42.3%		44.04%
	47.19%		44.04%
	38.96%		44.04%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

MARION GENERAL HOSPITAL	360011	OH
MOUNT CARMEL ST ANN'S HOSPITAL	360012	OH
WILSON MEMORIAL HOSPITAL	360013	OH
O'BLENESS MEMORIAL HOSPITAL	360014	OH
JEWISH HOSPITAL, LLC	360016	OH
GRANT MEDICAL CENTER	360017	OH
SUMMA HEALTH SYSTEM BARBERTON HOSPITAL	360019	OH
SUMMA HEALTH SYSTEMS HOSPITALS	360020	OH
FIRELANDS REGIONAL MEDICAL CENTER	360025	OH
GREENE MEMORIAL HOSPITAL	360026	OH
AKRON GENERAL MEDICAL CENTER	360027	OH
WOOD COUNTY HOSPITAL	360029	OH
GRAND LAKE HEALTH SYSTEM	360032	OH
MOUNT CARMEL HEALTH	360035	OH
WOOSTER COMMUNITY HOSPITAL	360036	OH
ST VINCENT CHARITY MEDICAL CENTER	360037	OH
GENESIS HEALTHCARE SYSTEM	360039	OH
KNOX COMMUNITY HOSPITAL	360040	OH
PARMA COMMUNITY GENERAL HOSPITAL	360041	OH
WAYNE HOSPITAL	360044	OH
MCCULLOUGH-HYDE MEMORIAL HOSPITAL	360046	OH
UNIVERSITY OF TOLEDO MEDICAL CENTER	360048	OH

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





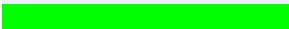
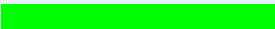
















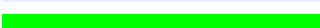
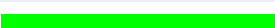
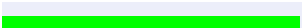
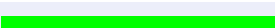
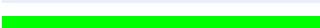
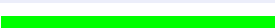
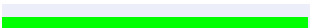
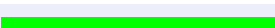
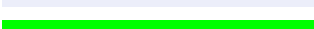
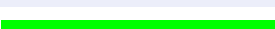
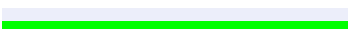
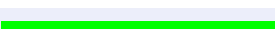
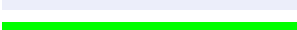
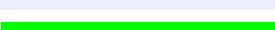
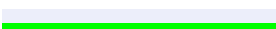
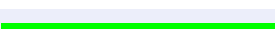
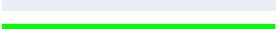
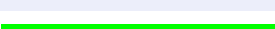


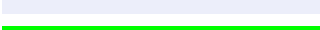
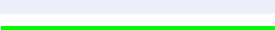
IP-Acute

Based on Spending Breakdown by Claim

\$6827.00	\$8205.00	\$8294.00
\$7974.00	\$8205.00	\$8294.00
\$6222.00	\$8205.00	\$8294.00
\$6854.00	\$8205.00	\$8294.00
\$8039.00	\$8205.00	\$8294.00
\$8553.00	\$8205.00	\$8294.00
\$7088.00	\$8205.00	\$8294.00
\$7779.00	\$8205.00	\$8294.00
\$8221.00	\$8205.00	\$8294.00
\$7604.00	\$8205.00	\$8294.00
\$8294.00	\$8205.00	\$8294.00
\$6562.00	\$8205.00	\$8294.00
\$7184.00	\$8205.00	\$8294.00
\$8961.00	\$8205.00	\$8294.00
\$7062.00	\$8205.00	\$8294.00
\$8223.00	\$8205.00	\$8294.00
\$7702.00	\$8205.00	\$8294.00
\$7254.00	\$8205.00	\$8294.00
\$7221.00	\$8205.00	\$8294.00
\$6472.00	\$8205.00	\$8294.00
\$7221.00	\$8205.00	\$8294.00
\$9561.00	\$8205.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	45.18%		44.04%
	44.16%		44.04%
	40.66%		44.04%
	43.01%		44.04%
	44.29%		44.04%
	46.62%		44.04%
	42.85%		44.04%
	44.09%		44.04%
	40.37%		44.04%
	37.12%		44.04%
	40.89%		44.04%
	45.22%		44.04%
	42.25%		44.04%
	45.28%		44.04%
	43.41%		44.04%
	44.46%		44.04%
	49.35%		44.04%
	41.97%		44.04%
	38.78%		44.04%
	38.72%		44.04%
	41.39%		44.04%
	45.22%		44.04%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

MIAMI VALLEY HOSPITAL	360051	OH
GOOD SAMARITAN HOSPITAL	360052	OH
TRUMBULL MEMORIAL HOSPITAL	360055	OH
HOLZER MEDICAL CENTER	360054	OH
MERCY HOSPITAL FAIRFIELD	360056	OH
MERCER COUNTY JOINT TOWNSHIP COMMUNITY HOSPITAL	360058	OH
METRO HEALTH MEDICAL CENTER	360059	OH
ST ELIZABETH HEALTH CENTER	360064	OH
FISHER-TITUS HOSPITAL	360065	OH
ST RITA'S MEDICAL CENTER	360066	OH
THE TOLEDO HOSPITAL	360068	OH
MERCY MEDICAL CENTER	360070	OH
VAN WERT COUNTY HOSPITAL	360071	OH
FAIRFIELD MEDICAL CENTER	360072	OH
FLOWER HOSPITAL	360074	OH
UHHS RICHMOND HEIGHTS HOSPITAL	360075	OH
FAIRVIEW HOSPITAL	360077	OH
ATRIUM MEDICAL CENTER	360076	OH
ROBINSON MEMORIAL HOSPITAL	360078	OH
KETTERING MEDICAL CENTER	360079	OH

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$8626.00	\$8205.00	\$8294.00
\$8309.00	\$8205.00	\$8294.00
\$7385.00	\$8205.00	\$8294.00
\$6815.00	\$8205.00	\$8294.00
\$7873.00	\$8205.00	\$8294.00
\$6615.00	\$8205.00	\$8294.00
\$8197.00	\$8205.00	\$8294.00
\$8052.00	\$8205.00	\$8294.00
\$6428.00	\$8205.00	\$8294.00
\$7592.00	\$8205.00	\$8294.00
\$9790.00	\$8205.00	\$8294.00
\$8860.00	\$8205.00	\$8294.00
\$7560.00	\$8205.00	\$8294.00
\$7770.00	\$8205.00	\$8294.00
\$7299.00	\$8205.00	\$8294.00
\$6396.00	\$8205.00	\$8294.00
\$7377.00	\$8205.00	\$8294.00
\$9007.00	\$8205.00	\$8294.00
\$6835.00	\$8205.00	\$8294.00
\$9881.00	\$8205.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.84%		44.04%
	43.43%		44.04%
	42.29%		44.04%
	41.51%		44.04%
	45.87%		44.04%
	40.86%		44.04%
	43.72%		44.04%
	39.55%		44.04%
	41.41%		44.04%
	44.64%		44.04%
	48.1%		44.04%
	41.93%		44.04%
	44.31%		44.04%
	44.09%		44.04%
	39.11%		44.04%
	37.32%		44.04%
	41.52%		44.04%
	43.83%		44.04%
	43.26%		44.04%
	47.02%		44.04%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

EAST OHIO REGIONAL HOSPITAL	360080	OH
MERCY ST CHARLES HOSPITAL	360081	OH
EUCLID HOSPITAL	360082	OH
AULTMAN HOSPITAL	360084	OH
OHIO STATE UNIVERSITY STATE HEALTH SYSTEM	360085	OH
SPRINGFIELD REGIONAL MEDICAL CENTER	360086	OH
LUTHERAN HOSPITAL	360087	OH
MERCY TIFFIN HOSPITAL	360089	OH
ST. LUKE'S HOSPITAL	360090	OH
MEDINA HOSPITAL	360091	OH
MEMORIAL HOSPITAL OF UNION COUNTY	360092	OH
BLANCHARD VALLEY REGIONAL HEALTH CENTER	360095	OH
EAST LIVERPOOL CITY HOSPITAL	360096	OH
LAKE HEALTH	360098	OH
BELLEVUE HOSPITAL	360107	OH
COSHOCTON COUNTY MEMORIAL HOSPITAL	360109	OH
MERCY ST VINCENT MEDICAL CENTER	360112	OH
MERCY FRANCISCAN HOSPITAL WESTERN HILLS	360113	OH
UH BEDFORD MEDICAL CENTER	360115	OH
SOUTHWEST REGIONAL MEDICAL CENTER	360116	OH
MEDCENTRAL HEALTH SYSTEM	360118	OH
COMMUNITY HOSPITALS AND WELLNESS	360121	OH

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





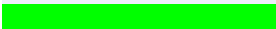
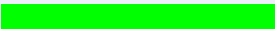
















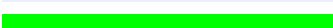
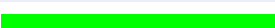
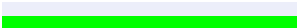
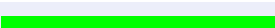
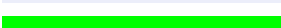
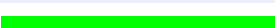
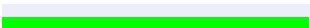
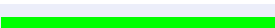
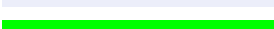
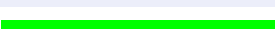
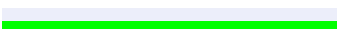
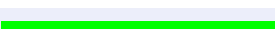
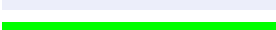
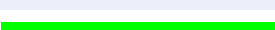
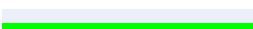
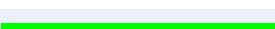
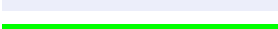
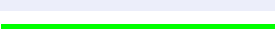


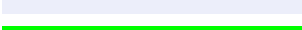
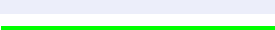
IP-Acute

Based on Spending Breakdown by Claim

\$6548.00	\$8205.00	\$8294.00
\$7633.00	\$8205.00	\$8294.00
\$7629.00	\$8205.00	\$8294.00
\$8470.00	\$8205.00	\$8294.00
\$9469.00	\$8205.00	\$8294.00
\$7966.00	\$8205.00	\$8294.00
\$9019.00	\$8205.00	\$8294.00
\$6302.00	\$8205.00	\$8294.00
\$7605.00	\$8205.00	\$8294.00
\$7501.00	\$8205.00	\$8294.00
\$6311.00	\$8205.00	\$8294.00
\$7893.00	\$8205.00	\$8294.00
\$5827.00	\$8205.00	\$8294.00
\$7585.00	\$8205.00	\$8294.00
\$6660.00	\$8205.00	\$8294.00
\$5402.00	\$8205.00	\$8294.00
\$8923.00	\$8205.00	\$8294.00
\$6545.00	\$8205.00	\$8294.00
\$6968.00	\$8205.00	\$8294.00
\$5692.00	\$8205.00	\$8294.00
\$7936.00	\$8205.00	\$8294.00
\$7329.00	\$8205.00	\$8294.00

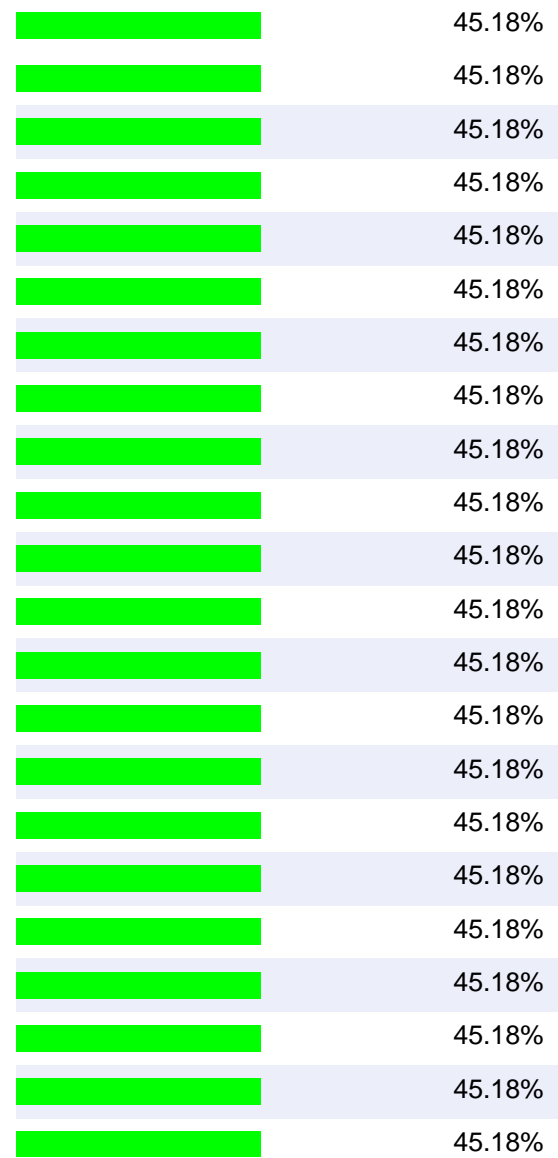
IP-Acute

Based on Spending Breakdown by Claim

	39.95%		44.04%
	42.07%		44.04%
	38.98%		44.04%
	43.62%		44.04%
	48.42%		44.04%
	42.43%		44.04%
	46.42%		44.04%
	45.16%		44.04%
	43.98%		44.04%
	39.68%		44.04%
	40.87%		44.04%
	47.13%		44.04%
	41.92%		44.04%
	39.58%		44.04%
	43.54%		44.04%
	38.71%		44.04%
	47.59%		44.04%
	38.93%		44.04%
	35.92%		44.04%
	39.25%		44.04%
	41.51%		44.04%
	42.83%		44.04%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

CENTERS

ST JOHN MEDICAL CENTER	360123	OH
ASHTABULA COUNTY MEDICAL CENTER	360125	OH
ALLIANCE COMMUNITY HOSPITAL	360131	OH
FORT HAMILTON HUGHES MEMORIAL HOSPITAL	360132	OH
GRANDVIEW AND SOUTHVIEW HOSPITALS	360133	OH
GOOD SAMARITAN HOSPITAL	360134	OH
UNIVERSITY HOSPITALS OF CLEVELAND	360137	OH
NORTHSIDE MEDICAL CENTER	360141	OH
MARYMOUNT HOSPITAL	360143	OH
SOUTH POINTE HOSPITAL	360144	OH
ELYRIA MEDICAL CENTER	360145	OH
MARIETTA MEMORIAL HOSPITAL	360147	OH
POMERENE HOSPITAL	360148	OH
SUMMA WESTERN RESERVE HOSPITAL	360150	OH
AFFINITY MEDICAL CENTER	360151	OH
DOCTORS HOSPITAL	360152	OH
BELMONT COMMUNITY HOSPITAL	360153	OH
SOUTHWEST GENERAL HEALTH CENTER	360155	OH
MEMORIAL HOSPITAL	360156	OH
ADENA REGIONAL MEDICAL CENTER	360159	OH
ST JOSEPH HEALTH CENTER	360161	OH

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7645.00	\$8205.00	\$8294.00
\$7110.00	\$8205.00	\$8294.00
\$7790.00	\$8205.00	\$8294.00
\$7289.00	\$8205.00	\$8294.00
\$8435.00	\$8205.00	\$8294.00
\$9506.00	\$8205.00	\$8294.00
\$10003.00	\$8205.00	\$8294.00
\$8689.00	\$8205.00	\$8294.00
\$7480.00	\$8205.00	\$8294.00
\$7455.00	\$8205.00	\$8294.00
\$7504.00	\$8205.00	\$8294.00
\$7108.00	\$8205.00	\$8294.00
\$7435.00	\$8205.00	\$8294.00
\$6872.00	\$8205.00	\$8294.00
\$8792.00	\$8205.00	\$8294.00
\$6917.00	\$8205.00	\$8294.00
\$5049.00	\$8205.00	\$8294.00
\$7698.00	\$8205.00	\$8294.00
\$6221.00	\$8205.00	\$8294.00
\$7803.00	\$8205.00	\$8294.00
\$7213.00	\$8205.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	41.81%		44.04%
	40.75%		44.04%
	38.73%		44.04%
	41.46%		44.04%
	44.81%		44.04%
	48.77%		44.04%
	47.42%		44.04%
	42.25%		44.04%
	39.2%		44.04%
	36.07%		44.04%
	43.96%		44.04%
	41.46%		44.04%
	37.93%		44.04%
	39.74%		44.04%
	43.77%		44.04%
	41.28%		44.04%
	37.24%		44.04%
	41.44%		44.04%
	40.81%		44.04%
	44.93%		44.04%
	38.41%		44.04%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

CHRIST HOSPITAL	360163	OH
BERGER HOSPITAL	360170	OH
MERCY REGIONAL MEDICAL CENTER	360172	OH
UPPER VALLEY MEDICAL CENTER	360174	OH
CLINTON MEMORIAL HOSPITAL	360175	OH
BETHESDA NORTH	360179	OH
CLEVELAND CLINIC	360180	OH
SALEM COMMUNITY HOSPITAL	360185	OH
MADISON COUNTY HOSPITAL	360189	OH
UH GEAUGA MEDICAL CENTER	360192	OH
SUMMA WADSWORTH-RITTMAN HOSPITAL	360195	OH
MARY RUTAN HOSPITAL	360197	OH
SOUTHEASTERN OHIO REGIONAL MEDICAL CENTER	360203	OH
GRADY MEMORIAL HOSPITAL	360210	OH
TRINITY MEDICAL CTR EAST&TRINITY MEDICAL CTR WEST	360211	OH
LAKEWOOD HOSPITAL	360212	OH
LICKING MEMORIAL HOSPITAL	360218	OH
HILLCREST HOSPITAL	360230	OH
MERCY FRANCISCAN HOSPITAL - MT AIRY	360234	OH

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$10071.00	\$8205.00	\$8294.00
\$7342.00	\$8205.00	\$8294.00
\$7084.00	\$8205.00	\$8294.00
\$6417.00	\$8205.00	\$8294.00
\$6709.00	\$8205.00	\$8294.00
\$8564.00	\$8205.00	\$8294.00
\$13797.00	\$8205.00	\$8294.00
\$7076.00	\$8205.00	\$8294.00
\$6469.00	\$8205.00	\$8294.00
\$7765.00	\$8205.00	\$8294.00
\$6369.00	\$8205.00	\$8294.00
\$7757.00	\$8205.00	\$8294.00
\$6357.00	\$8205.00	\$8294.00
\$6978.00	\$8205.00	\$8294.00
\$7732.00	\$8205.00	\$8294.00
\$7633.00	\$8205.00	\$8294.00
\$6795.00	\$8205.00	\$8294.00
\$8081.00	\$8205.00	\$8294.00
\$6932.00	\$8205.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	49.3%		44.04%
	40.06%		44.04%
	39.6%		44.04%
	38.35%		44.04%
	40.1%		44.04%
	44.95%		44.04%
	56.98%		44.04%
	39.52%		44.04%
	41.42%		44.04%
	42.98%		44.04%
	37.28%		44.04%
	45.54%		44.04%
	44.39%		44.04%
	43.06%		44.04%
	36.32%		44.04%
	38.63%		44.04%
	43.57%		44.04%
	42.16%		44.04%
	38.65%		44.04%

IP-Acute

Based on Spending Breakdown by Claim

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IP-Acute

Based on Spending Breakdown by Claim

MERCY HOSPITAL CLERMONT	360236	OH
KETTERING MEDICAL CENTER - SYCAMORE	360239	OH
GLENBEIGH	360245	OH
BAY PARK COMMUNITY HOSPITAL	360259	OH
MERCY ST ANNE HOSPITAL	360262	OH
INSTITUTE FOR ORTHOPEDIC SURGERY	360263	OH
MOUNT CARMEL NEW ALBANY SURGICAL HOSPITAL	360266	OH
MERCY HOSPITAL OF DEFIANCE	360270	OH
MEDICAL CENTER AT ELIZABETH PLACE	360274	OH
HMHP ST ELIZABETH BOARDMAN HEALTH CENTER	360276	OH
MEDICAL CENTER OF NEWARK LLC	360347	OH
DUBLIN METHODIST HOSPITAL	360348	OH
EVENDALE MEDICAL CENTER	360350	OH
CRYSTAL CLINIC ORTHOPAEDIC CENTER	360351	OH
SURGICAL HOSPITAL AT SOUTHWOODS	360352	OH
WEST CHESTER MEDICAL CENTER	360354	OH
OHIO VALLEY MEDICAL CENTER, LLC	360355	OH
UNIVERSITY HOSPITALS AHUJA MEDICAL CENTER	360359	OH
HILLCREST MEDICAL CENTER	370001	OK
WOODWARD REGIONAL HOSPITAL	370002	OK

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





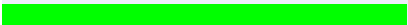
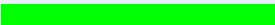










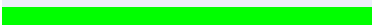
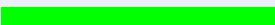






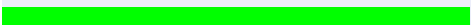
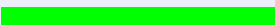


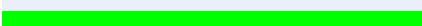
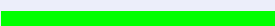


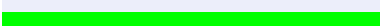
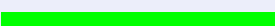
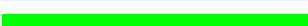
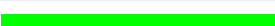
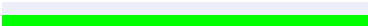
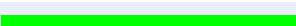


IP-Acute

Based on Spending Breakdown by Claim

\$7292.00	\$8205.00	\$8294.00
\$6954.00	\$8205.00	\$8294.00
\$5679.00	\$8205.00	\$8294.00
\$7069.00	\$8205.00	\$8294.00
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\$15916.00	\$8205.00	\$8294.00
\$12409.00	\$8205.00	\$8294.00
\$12019.00	\$8205.00	\$8294.00
\$8861.00	\$8205.00	\$8294.00
\$10105.00	\$8205.00	\$8294.00
\$7290.00	\$8205.00	\$8294.00
\$9595.00	\$8133.00	\$8294.00
\$5902.00	\$8133.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	44.57%		44.04%
	41.15%		44.04%
	57.45%		44.04%
	43.58%		44.04%
	41.95%		44.04%
	57.97%		44.04%
	61.41%		44.04%
	37.48%		44.04%
	52.47%		44.04%
	38.08%		44.04%
	48.95%		44.04%
	46.06%		44.04%
	66.35%		44.04%
	59.65%		44.04%
	59.56%		44.04%
	46.22%		44.04%
	53.89%		44.04%
	43.43%		44.04%
	52.05%		47.62%
	46.21%		47.62%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

INTEGRIS BAPTIST REG HEALTH CENTER	370004	OK
PONCA CITY MEDICAL CENTER	370006	OK
NEWMAN MEMORIAL HOSPITAL	370007	OK
NORMAN REGIONAL HEALTH SYSTEM	370008	OK
MERCY HOSPITAL EL RENO	370011	OK
MERCY HEALTH CENTER, INC	370013	OK
MEDICAL CENTER OF SOUTHEASTERN OKLAHOMA	370014	OK
INTEGRIS MAYES COUNTY MEDICAL CENTER	370015	OK
INTEGRIS BASS BAPTIST HEALTH CENTER	370016	OK
JANE PHILLIPS MEDICAL CENTER	370018	OK
GREAT PLAINS REGIONAL MEDICAL CENTER	370019	OK
VALLEY VIEW REGIONAL HOSPITAL	370020	OK
JACKSON COUNTY MEMORIAL HOSPITAL	370022	OK
DUNCAN REGIONAL HOSPITAL, INC	370023	OK
MUSKOGEE REGIONAL MEDICAL CENTER	370025	OK
ST MARY'S REGIONAL MEDICAL CENTER	370026	OK
INTEGRIS BAPTIST MEDICAL CENTER	370028	OK
INTEGRIS CLINTON REGIONAL HOSPITAL	370029	OK
INTEGRIS BLACKWELL REGIONAL HOSPITAL	370030	OK
DEACONESS HOSPITAL	370032	OK
MCALESTER REGIONAL HEALTH CENTER	370034	OK

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

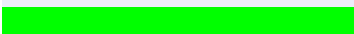
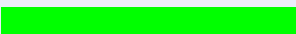


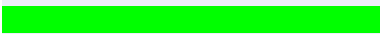
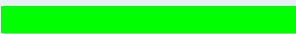










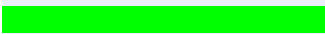
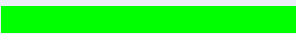
























IP-Acute

Based on Spending Breakdown by Claim

	\$6146.00	\$8133.00	\$8294.00
	\$6704.00	\$8133.00	\$8294.00
	\$5172.00	\$8133.00	\$8294.00
	\$7986.00	\$8133.00	\$8294.00
	\$4985.00	\$8133.00	\$8294.00
	\$8776.00	\$8133.00	\$8294.00
	\$5945.00	\$8133.00	\$8294.00
	\$5576.00	\$8133.00	\$8294.00
	\$8044.00	\$8133.00	\$8294.00
	\$8591.00	\$8133.00	\$8294.00
	\$6836.00	\$8133.00	\$8294.00
	\$8610.00	\$8133.00	\$8294.00
	\$7640.00	\$8133.00	\$8294.00
	\$6727.00	\$8133.00	\$8294.00
	\$6841.00	\$8133.00	\$8294.00
	\$7629.00	\$8133.00	\$8294.00
	\$10549.00	\$8133.00	\$8294.00
	\$5590.00	\$8133.00	\$8294.00
	\$6243.00	\$8133.00	\$8294.00
	\$7051.00	\$8133.00	\$8294.00
	\$7602.00	\$8133.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	50.05%		47.62%
	45.63%		47.62%
	53.69%		47.62%
	44.28%		47.62%
	34.75%		47.62%
	44.57%		47.62%
	41.22%		47.62%
	38.5%		47.62%
	45.86%		47.62%
	45.94%		47.62%
	44.97%		47.62%
	46.85%		47.62%
	45.86%		47.62%
	41.08%		47.62%
	40%		47.62%
	45.57%		47.62%
	50.83%		47.62%
	40.22%		47.62%
	44.92%		47.62%
	42.36%		47.62%
	43.18%		47.62%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

HARMON MEMORIAL HOSPITAL	370036	OK
ST ANTHONY HOSPITAL	370037	OK
HILLCREST HOSPITAL CLAREMORE	370039	OK
EASTERN OKLAHOMA MEDICAL CENTER	370040	OK
BRISTOW MEDICAL CENTER	370041	OK
MERCY MEMORIAL HEALTH CENTER	370047	OK
MCCURTAIN MEMORIAL HOSPITAL	370048	OK
STILLWATER MEDICAL CENTER	370049	OK
MEMORIAL HOSPITAL & PHYSICIAN GROUP	370051	OK
GRADY MEMORIAL HOSPITAL	370054	OK
COMANCHE COUNTY MEMORIAL HOSPITAL	370056	OK
OKMULGEE MEMORIAL HOSPITAL	370057	OK
CRAIG GENERAL HOSPITAL	370065	OK
LATIMER COUNTY GENERAL HOSPITAL	370072	OK
OSU MEDICAL CENTER	370078	OK
SHARE MEMORIAL HOSPITAL	370080	OK
PUSHMATAHA CTY-TN OF ANTLERS HOSP AUTH	370083	OK
TAHLEQUAH CITY HOSPITAL	370089	OK
SAINT FRANCIS HOSPITAL, INC	370091	OK
OU MEDICAL CENTER	370093	OK
MIDWEST REGIONAL MEDICAL CENTER	370094	OK
SOUTHWESTERN MEDICAL CENTER	370097	OK

IP-Acute

Based on Spending Breakdown by Claim

[illegible]













































IP-Acute

Based on Spending Breakdown by Claim

\$6483.00	\$8133.00	\$8294.00
\$9499.00	\$8133.00	\$8294.00
\$5738.00	\$8133.00	\$8294.00
\$5328.00	\$8133.00	\$8294.00
\$4470.00	\$8133.00	\$8294.00
\$8341.00	\$8133.00	\$8294.00
\$5106.00	\$8133.00	\$8294.00
\$7563.00	\$8133.00	\$8294.00
\$6335.00	\$8133.00	\$8294.00
\$6767.00	\$8133.00	\$8294.00
\$8903.00	\$8133.00	\$8294.00
\$5229.00	\$8133.00	\$8294.00
\$5258.00	\$8133.00	\$8294.00
\$4089.00	\$8133.00	\$8294.00
\$8444.00	\$8133.00	\$8294.00
\$5725.00	\$8133.00	\$8294.00
\$4684.00	\$8133.00	\$8294.00
\$7953.00	\$8133.00	\$8294.00
\$8324.00	\$8133.00	\$8294.00
\$9342.00	\$8133.00	\$8294.00
\$7144.00	\$8133.00	\$8294.00
\$7769.00	\$8133.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	56.1%		47.62%
	51.62%		47.62%
	43.77%		47.62%
	39.48%		47.62%
	35.31%		47.62%
	47.94%		47.62%
	36.15%		47.62%
	44.07%		47.62%
	56.46%		47.62%
	44.19%		47.62%
	51.1%		47.62%
	35.93%		47.62%
	42.71%		47.62%
	41.78%		47.62%
	48.24%		47.62%
	63.15%		47.62%
	36.29%		47.62%
	48.92%		47.62%
	46.18%		47.62%
	47.74%		47.62%
	44.15%		47.62%
	46.46%		47.62%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

HILLCREST HOSPITAL CUSHING	370099	OK
CHOCTAW MEMORIAL HOSPITAL	370100	OK
SAYRE MEMORIAL HOSPITAL, INC	370103	OK
INTEGRIS SOUTHWEST MEDICAL CENTER	370106	OK
SEQUOYAH MEMORIAL HOSPITAL	370112	OK
INTEGRIS GROVE HOSPITAL	370113	OK
ST JOHN MEDICAL CENTER, INC	370114	OK
MEMORIAL HOSPITAL OF TEXAS COUNTY	370138	OK
PERRY MEMORIAL HOSPITAL	370139	OK
ST. ANTHONY SHAWNEE HOSPITAL	370149	OK
ELKVIEW GENERAL HOSPITAL	370153	OK
PAULS VALLEY GENERAL HOSPITAL	370156	OK
PURCELL MUNICIPAL HOSPITAL	370158	OK
WAGONER COMMUNITY HOSPITAL	370166	OK
CHEROKEE NATION W W HASTINGS INDIAN HOSPITAL	370171	OK
CHOCTAW NATION HEALTHCARE	370172	OK
CLAREMORE INDIAN HOSPITAL	370173	OK
MEMORIAL HOSPITAL OF STILWELL	370178	OK
CHICKASAW NATION MEDICAL CENTER	370180	OK
HILLCREST HOSPITAL HENRYETTA	370183	OK

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$5579.00	\$8133.00	\$8294.00
\$5250.00	\$8133.00	\$8294.00
\$5127.00	\$8133.00	\$8294.00
\$8307.00	\$8133.00	\$8294.00
\$5477.00	\$8133.00	\$8294.00
\$6356.00	\$8133.00	\$8294.00
\$8205.00	\$8133.00	\$8294.00
\$6318.00	\$8133.00	\$8294.00
\$5244.00	\$8133.00	\$8294.00
\$6294.00	\$8133.00	\$8294.00
\$6206.00	\$8133.00	\$8294.00
\$5856.00	\$8133.00	\$8294.00
\$5236.00	\$8133.00	\$8294.00
\$4906.00	\$8133.00	\$8294.00
\$5131.00	\$8133.00	\$8294.00
\$4498.00	\$8133.00	\$8294.00
\$5720.00	\$8133.00	\$8294.00
\$4986.00	\$8133.00	\$8294.00
\$6134.00	\$8133.00	\$8294.00
\$5793.00	\$8133.00	\$8294.00

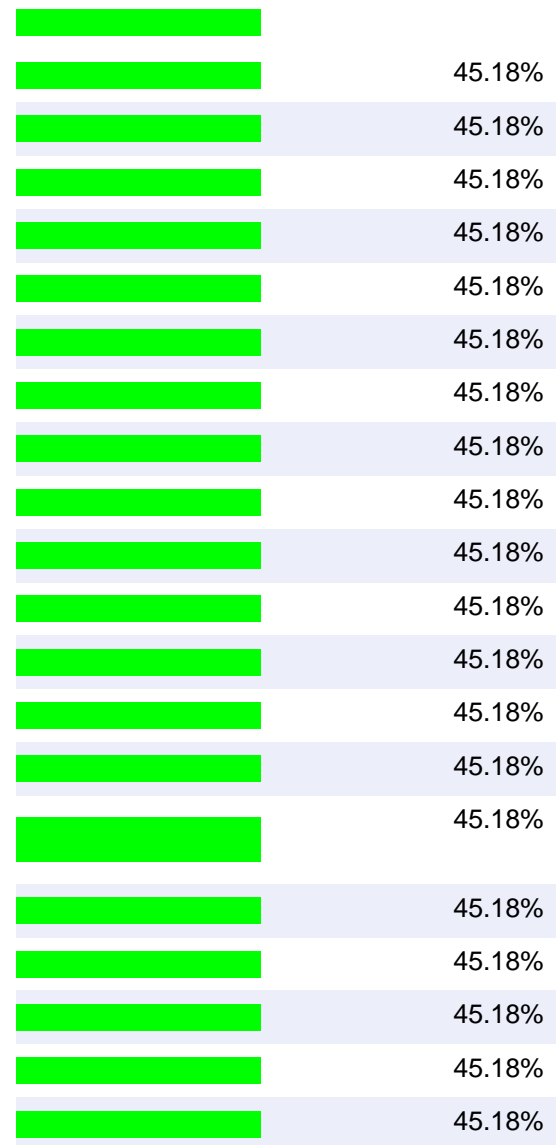
IP-Acute

Based on Spending Breakdown by Claim

	46.5%		47.62%
	38.2%		47.62%
	45.11%		47.62%
	44.51%		47.62%
	39.29%		47.62%
	43.87%		47.62%
	47.4%		47.62%
	51.24%		47.62%
	41.83%		47.62%
	40.68%		47.62%
	47.51%		47.62%
	45.1%		47.62%
	39.23%		47.62%
	52.38%		47.62%
	46.96%		47.62%
	52.47%		47.62%
	50.31%		47.62%
	43.96%		47.62%
	54.15%		47.62%
	50.55%		47.62%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

SOUTHWESTERN REGIONAL MEDICAL CENTER	370190	OK
HILLCREST HOSPITAL SOUTH	370202	OK
COMMUNITY HOSPITAL	370203	OK
OKLAHOMA SPINE HOSPITAL	370206	OK
OKLAHOMA SURGICAL HOSPITAL, LLC	370210	OK
INTEGRIS CANADIAN VALLEY REGIONAL HOSPITAL	370211	OK
OKLAHOMA CENTER FOR ORTHOPAEDIC & MULTI-SP	370212	OK
OKLAHOMA HEART HOSPITAL	370215	OK
TULSA SPINE & SPECIALTY HOSPITAL	370216	OK
SAINT FRANCIS HOSPITAL SOUTH	370218	OK
ORTHOPEDIC HOSPITAL	370220	OK
MCBRIDE CLINIC ORTHOPEDIC HOSPITAL, L L C	370222	OK
SUMMIT MEDICAL CENTER	370225	OK
ST JOHN OWASSO	370227	OK
BAILEY MEDICAL CENTER, L L C	370228	OK
INTEGRIS SEMINOLE MEDICAL CENTER	370229	OK
MUSKOGEE COMMUNITY HOSPITAL	370232	OK
OKLAHOMA HEART HOSPITAL SOUTH	370234	OK
ST JOHN BROKEN ARROW	370235	OK
MID-COLUMBIA MEDICAL CENTER	380001	OR

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





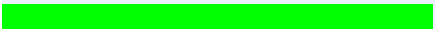
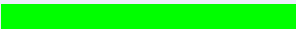










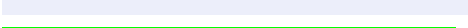
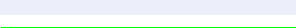
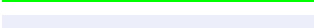
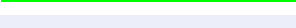
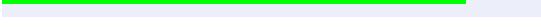
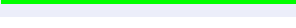
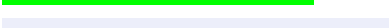
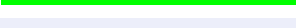
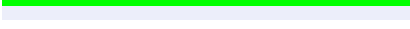
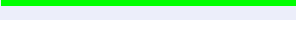




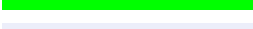
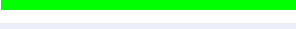
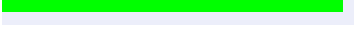
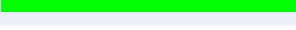


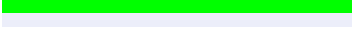
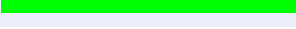


IP-Acute

Based on Spending Breakdown by Claim

\$10860.00	\$8133.00	\$8294.00
\$7706.00	\$8133.00	\$8294.00
\$14735.00	\$8133.00	\$8294.00
\$11340.00	\$8133.00	\$8294.00
\$11298.00	\$8133.00	\$8294.00
\$6590.00	\$8133.00	\$8294.00
\$13159.00	\$8133.00	\$8294.00
\$12777.00	\$8133.00	\$8294.00
\$13183.00	\$8133.00	\$8294.00
\$7129.00	\$8133.00	\$8294.00
\$23783.00	\$8133.00	\$8294.00
\$11583.00	\$8133.00	\$8294.00
\$9387.00	\$8133.00	\$8294.00
\$5369.00	\$8133.00	\$8294.00
\$6512.00	\$8133.00	\$8294.00
\$5357.00	\$8133.00	\$8294.00
\$7121.00	\$8133.00	\$8294.00
\$10274.00	\$8133.00	\$8294.00
\$7622.00	\$8133.00	\$8294.00
\$7661.00	\$9184.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.36%		47.62%
	45.12%		47.62%
	61.21%		47.62%
	66.57%		47.62%
	63.78%		47.62%
	43.26%		47.62%
	59.59%		47.62%
	64.42%		47.62%
	65.81%		47.62%
	44.21%		47.62%
	76.21%		47.62%
	54.98%		47.62%
	57.93%		47.62%
	44.59%		47.62%
	48.39%		47.62%
	35.42%		47.62%
	49.88%		47.62%
	61.1%		47.62%
	49.76%		47.62%
	47.31%		53.98%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

ASANTE THREE RIVERS MEDICAL CENTER	380002	OR
PROVIDENCE ST VINCENT MEDICAL CENTER	380004	OR
ASHLAND COMMUNITY HOSPITAL	380005	OR
LEGACY EMANUEL MEDICAL CENTER	380007	OR
OHSU HOSPITAL	380009	OR
GOOD SAMARITAN REGIONAL MEDICAL CENTER	380014	OR
LEGACY GOOD SAMARITAN MEDICAL CENTER	380017	OR
ASANTE ROGUE REGIONAL MEDICAL CENTER	380018	OR
MCKENZIE-WILLAMETTE MEDICAL CENTER	380020	OR
TUALITY COMMUNITY HOSPITAL	380021	OR
SAMARITAN ALBANY GENERAL HOSPITAL	380022	OR
LEGACY MOUNT HOOD MEDICAL CENTER	380025	OR
MERCY MEDICAL CENTER	380027	OR
SILVERTON HOSPITAL	380029	OR
SACRED HEART UNIVERSITY DISTRICT	380033	OR
PROVIDENCE NEWBERG MEDICAL CENTER	380037	OR
PROVIDENCE WILLAMETTE FALLS MEDICAL CENTER	380038	OR
ST CHARLES REDMOND MEDICAL CENTER	380040	OR
ELLWOOD CITY HOSPITAL	390008	PA
ST CHARLES MEDICAL CENTER - BEND	380047	OR
SKY LAKES MEDICAL CENTER	380050	OR

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

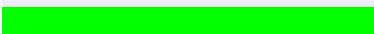


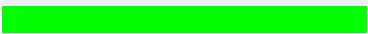
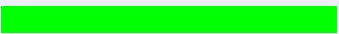










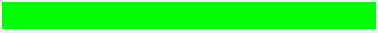
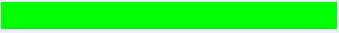







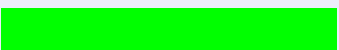
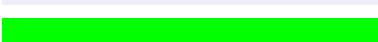
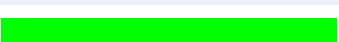
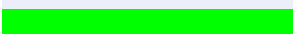
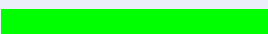


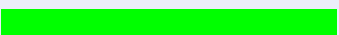
IP-Acute

Based on Spending Breakdown by Claim

\$8002.00	\$9184.00	\$8294.00
\$9634.00	\$9184.00	\$8294.00
\$9156.00	\$9184.00	\$8294.00
\$9606.00	\$9184.00	\$8294.00
\$12423.00	\$9184.00	\$8294.00
\$9578.00	\$9184.00	\$8294.00
\$9956.00	\$9184.00	\$8294.00
\$10344.00	\$9184.00	\$8294.00
\$8825.00	\$9184.00	\$8294.00
\$8407.00	\$9184.00	\$8294.00
\$7110.00	\$9184.00	\$8294.00
\$7799.00	\$9184.00	\$8294.00
\$7268.00	\$9184.00	\$8294.00
\$7653.00	\$9184.00	\$8294.00
\$5447.00	\$9184.00	\$8294.00
\$7345.00	\$9184.00	\$8294.00
\$7838.00	\$9184.00	\$8294.00
\$7305.00	\$9184.00	\$8294.00
\$6123.00	\$8157.00	\$8294.00
\$9965.00	\$9184.00	\$8294.00
\$9028.00	\$9184.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	52.89%		53.98%
	54.63%		53.98%
	51.84%		53.98%
	52.02%		53.98%
	57.57%		53.98%
	53.62%		53.98%
	53.89%		53.98%
	57.67%		53.98%
	55.06%		53.98%
	50.45%		53.98%
	53.1%		53.98%
	51.89%		53.98%
	50.41%		53.98%
	54.61%		53.98%
	43.78%		53.98%
	47.95%		53.98%
	50.85%		53.98%
	53.37%		53.98%
	41.49%		43.14%
	58.74%		53.98%
	57.5%		53.98%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

SALEM HOSPITAL	380051	OR
ST ALPHONSUS MEDICAL CENTER - ONTARIO, INC	380052	OR
SANTIAM MEMORIAL HOSPITAL	380056	OR
ADVENTIST MEDICAL CENTER	380060	OR
PROVIDENCE PORTLAND MEDICAL CENTER	380061	OR
WILLAMETTE VALLEY MEDICAL CENTER	380071	OR
PROVIDENCE MEDFORD MEDICAL CENTER	380075	OR
PROVIDENCE MILWAUKIE HOSPITAL	380082	OR
LEGACY MERIDIAN PARK MEDICAL CENTER	380089	OR
BAY AREA HOSPITAL	380090	OR
KAISER SUNNYSIDE MEDICAL CENTER	380091	OR
SACRED HEART MEDICAL CENTER - RIVERBEND	380102	OR
GEISINGER-COMMUNITY MEDICAL CENTER	390001	PA
UPMC MCKEESPORT HOSPITAL	390002	PA
GEISINGER - BLOOMSBURG HOSPITAL	390003	PA
HOLY SPIRIT HOSPITAL	390004	PA
GEISINGER MEDICAL CENTER	390006	PA
SAINT VINCENT HEALTH CENTER	390009	PA
ABINGTON HEALTH LANSDALE HOSPITAL	390012	PA
EVANGELICAL COMMUNITY HOSPITAL	390013	PA
JAMESON MEMORIAL HOSPITAL	390016	PA
PALMERTON HOSPITAL	390019	PA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$9598.00	\$9184.00	\$8294.00
\$6998.00	\$9184.00	\$8294.00
\$6429.00	\$9184.00	\$8294.00
\$8957.00	\$9184.00	\$8294.00
\$9132.00	\$9184.00	\$8294.00
\$7541.00	\$9184.00	\$8294.00
\$8312.00	\$9184.00	\$8294.00
\$7073.00	\$9184.00	\$8294.00
\$8157.00	\$9184.00	\$8294.00
\$6842.00	\$9184.00	\$8294.00
\$10584.00	\$9184.00	\$8294.00
\$10580.00	\$9184.00	\$8294.00
\$8790.00	\$8157.00	\$8294.00
\$6850.00	\$8157.00	\$8294.00
\$7033.00	\$8157.00	\$8294.00
\$8672.00	\$8157.00	\$8294.00
\$9566.00	\$8157.00	\$8294.00
\$9050.00	\$8157.00	\$8294.00
\$6781.00	\$8157.00	\$8294.00
\$7911.00	\$8157.00	\$8294.00
\$6534.00	\$8157.00	\$8294.00
\$6413.00	\$8157.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

<div></div>	53.44%	<div></div>	53.98%
<div></div>	44.1%	<div></div>	53.98%
<div></div>	47.41%	<div></div>	53.98%
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<div></div>	53.93%	<div></div>	53.98%
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<div></div>	45.33%	<div></div>	53.98%
<div></div>	64.6%	<div></div>	53.98%
<div></div>	57.78%	<div></div>	53.98%
<div></div>	42.54%	<div></div>	43.14%
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<div></div>	41.19%	<div></div>	43.14%
<div></div>	47.28%	<div></div>	43.14%
<div></div>	37.43%	<div></div>	43.14%
<div></div>	39.26%	<div></div>	43.14%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

KENSINGTON HOSPITAL	390025	PA
CHESTNUT HILL HOSPITAL	390026	PA
TEMPLE UNIVERSITY HOSPITAL	390027	PA
UPMC MERCY	390028	PA
SCHUYLKILL MEDICAL CENTER - SOUTH JACKSON STREET	390030	PA
SCHUYLKILL MEDICAL CENTER - NORWEGIAN STREET	390031	PA
ALLE KISKI MEDICAL CENTER	390032	PA
ST LUKES QUAKERTOWN HOSPITAL	390035	PA
HERITAGE VALLEY BEAVER	390036	PA
HERITAGE VALLEY SEWICKLEY	390037	PA
SOMERSET COMMUNITY HOSPITAL	390039	PA
UNIONTOWN HOSPITAL	390041	PA
WASHINGTON HOSPITAL THE	390042	PA
SOLDIERS AND SAILORS MEMORIAL HOSPITAL	390043	PA
READING HOSPITAL AND MEDICAL CENTER	390044	PA
WILLIAMSPORT HOSPITAL AND MEDICAL CENTER	390045	PA
YORK HOSPITAL	390046	PA
LEWISTOWN HOSPITAL	390048	PA
ST LUKE'S HOSPITAL BETHLEHEM	390049	PA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$3473.00	\$8157.00	\$8294.00
\$6555.00	\$8157.00	\$8294.00
\$8828.00	\$8157.00	\$8294.00
\$8046.00	\$8157.00	\$8294.00
\$6505.00	\$8157.00	\$8294.00
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\$7475.00	\$8157.00	\$8294.00
\$6707.00	\$8157.00	\$8294.00
\$8177.00	\$8157.00	\$8294.00
\$7725.00	\$8157.00	\$8294.00
\$6718.00	\$8157.00	\$8294.00
\$7134.00	\$8157.00	\$8294.00
\$7945.00	\$8157.00	\$8294.00
\$6448.00	\$8157.00	\$8294.00
\$8794.00	\$8157.00	\$8294.00
\$8940.00	\$8157.00	\$8294.00
\$8599.00	\$8157.00	\$8294.00
\$6115.00	\$8157.00	\$8294.00
\$7777.00	\$8157.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	59.67%		43.14%
	35.26%		43.14%
	46.27%		43.14%
	40.67%		43.14%
	39.72%		43.14%
	36.31%		43.14%
	36.46%		43.14%
	40.8%		43.14%
	44.65%		43.14%
	40.43%		43.14%
	40.93%		43.14%
	38.69%		43.14%
	43.69%		43.14%
	42%		43.14%
	42.9%		43.14%
	46.43%		43.14%
	44.99%		43.14%
	36.93%		43.14%
	41.91%		43.14%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

ALLEGHENY GENERAL HOSPITAL	390050	PA
CLEARFIELD HOSPITAL	390052	PA
GOOD SAMARITAN HOSPITAL	390066	PA
J C BLAIR MEMORIAL HOSPITAL	390056	PA
GRAND VIEW HOSPITAL	390057	PA
CARLISLE REGIONAL MEDICAL CENTER	390058	PA
LANCASTER REGIONAL MEDICAL CENTER	390061	PA
NASON HOSPITAL	390062	PA
UPMC HAMOT HOSPITAL	390063	PA
GETTYSBURG HOSPITAL	390065	PA
PINNACLE HEALTH HOSPITALS	390067	PA
HEART OF LANCASTER REGIONAL MEDICAL CENTER	390068	PA
LOWER BUCKS HOSPITAL	390070	PA
LOCK HAVEN HOSPITAL	390071	PA
BERWICK HOSPITAL CENTER	390072	PA
ALTOONA REGIONAL HEALTH SYSTEM	390073	PA
BRANDYWINE HOSPITAL	390076	PA
ROBERT PACKER HOSPITAL	390079	PA
JEANES HOSPITAL	390080	PA
DELAWARE COUNTY MEMORIAL HOSPITAL	390081	PA
SUNBURY COMMUNITY HOSPITAL	390084	PA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

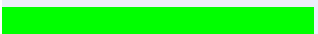
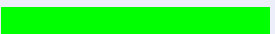


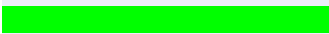
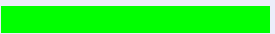














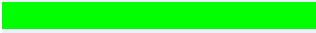
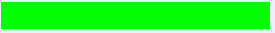


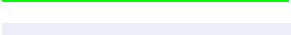
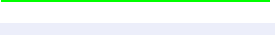
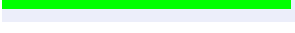
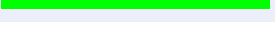
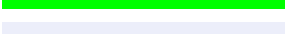
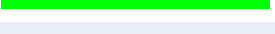
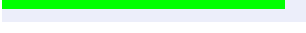
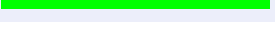
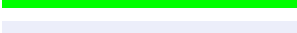
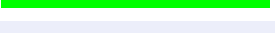
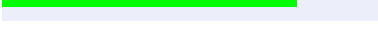
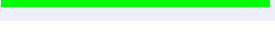
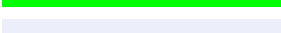
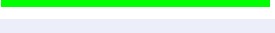
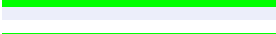
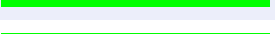
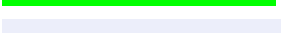
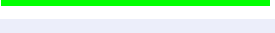
IP-Acute

Based on Spending Breakdown by Claim

\$10030.00	\$8157.00	\$8294.00
\$6397.00	\$8157.00	\$8294.00
\$8021.00	\$8157.00	\$8294.00
\$5867.00	\$8157.00	\$8294.00
\$7632.00	\$8157.00	\$8294.00
\$6864.00	\$8157.00	\$8294.00
\$8811.00	\$8157.00	\$8294.00
\$6784.00	\$8157.00	\$8294.00
\$10089.00	\$8157.00	\$8294.00
\$6960.00	\$8157.00	\$8294.00
\$10291.00	\$8157.00	\$8294.00
\$6777.00	\$8157.00	\$8294.00
\$6318.00	\$8157.00	\$8294.00
\$6432.00	\$8157.00	\$8294.00
\$5642.00	\$8157.00	\$8294.00
\$8851.00	\$8157.00	\$8294.00
\$7541.00	\$8157.00	\$8294.00
\$8947.00	\$8157.00	\$8294.00
\$7702.00	\$8157.00	\$8294.00
\$7466.00	\$8157.00	\$8294.00
\$6674.00	\$8157.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	44.26%		43.14%
	37.85%		43.14%
	46.47%		43.14%
	39.72%		43.14%
	44.24%		43.14%
	38.66%		43.14%
	46.7%		43.14%
	39.55%		43.14%
	43.65%		43.14%
	40.63%		43.14%
	44.68%		43.14%
	40.64%		43.14%
	40.99%		43.14%
	41.68%		43.14%
	40.19%		43.14%
	42.93%		43.14%
	41.87%		43.14%
	53.59%		43.14%
	39.28%		43.14%
	38.79%		43.14%
	39.56%		43.14%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

DUBOIS REGIONAL MEDICAL CENTER	390086	PA
WESTERN PENNSYLVANIA HOSPITAL	390090	PA
UPMC NORTHWEST	390091	PA
CLARION HOSPITAL	390093	PA
ST JOSEPH MEDICAL CENTER	390096	PA
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER	390097	PA
LANCASTER GENERAL HOSPITAL	390100	PA
MEMORIAL HOSPITAL YORK	390101	PA
UPMC ST MARGARET	390102	PA
KANE COMMUNITY HOSPITAL	390104	PA
UPMC PASSAVANT	390107	PA
MONTGOMERY HOSPITAL	390108	PA
CONEMAUGH VALLEY MEMORIAL HOSPITAL	390110	PA
HOSPITAL OF UNIV OF PENNSYLVANIA	390111	PA
WINDBER HOSPITAL	390112	PA
MEADVILLE MEDICAL CENTER	390113	PA
MAGEE WOMENS HOSP OF THE UPMC HEALTH SYS	390114	PA
ARIA HEALTH	390115	PA
MERCY SUBURBAN HOSPITAL	390116	PA
UPMC BEDFORD	390117	PA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





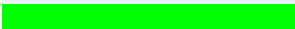
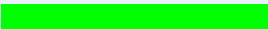




























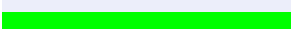
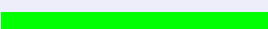




IP-Acute

Based on Spending Breakdown by Claim

\$8026.00	\$8157.00	\$8294.00
\$11388.00	\$8157.00	\$8294.00
\$6563.00	\$8157.00	\$8294.00
\$7038.00	\$8157.00	\$8294.00
\$8824.00	\$8157.00	\$8294.00
\$7405.00	\$8157.00	\$8294.00
\$9080.00	\$8157.00	\$8294.00
\$7697.00	\$8157.00	\$8294.00
\$7537.00	\$8157.00	\$8294.00
\$6085.00	\$8157.00	\$8294.00
\$8901.00	\$8157.00	\$8294.00
\$6927.00	\$8157.00	\$8294.00
\$7816.00	\$8157.00	\$8294.00
\$11579.00	\$8157.00	\$8294.00
\$6854.00	\$8157.00	\$8294.00
\$7562.00	\$8157.00	\$8294.00
\$8454.00	\$8157.00	\$8294.00
\$7607.00	\$8157.00	\$8294.00
\$6809.00	\$8157.00	\$8294.00
\$6410.00	\$8157.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.8%		43.14%
	53.11%		43.14%
	41.54%		43.14%
	40.74%		43.14%
	44.62%		43.14%
	40.96%		43.14%
	46.59%		43.14%
	41.19%		43.14%
	38.9%		43.14%
	36.15%		43.14%
	43.01%		43.14%
	41.05%		43.14%
	43.34%		43.14%
	52.22%		43.14%
	43.62%		43.14%
	46.76%		43.14%
	50.75%		43.14%
	40.92%		43.14%
	34.31%		43.14%
	42.05%		43.14%

IP-Acute

Based on Spending Breakdown by Claim

1	45.18%
2	45.18%
3	45.18%
4	45.18%
5	45.18%
6	45.18%
7	45.18%
8	45.18%
9	45.18%
10	45.18%
11	45.18%
12	45.18%
13	45.18%
14	45.18%
15	45.18%
16	45.18%
17	45.18%
18	45.18%
19	45.18%
20	45.18%

IP-Acute

Based on Spending Breakdown by Claim

BRADFORD REGIONAL MEDICAL CENTER	390118	PA
MOSES TAYLOR HOSPITAL	390119	PA
TITUSVILLE HOSPITAL	390122	PA
POTTSTOWN MEMORIAL MEDICAL CENTER	390123	PA
WAYNE MEMORIAL HOSPITAL	390125	PA
PHOENIXVILLE HOSPITAL	390127	PA
MINERS MEDICAL CENTER	390130	PA
ST JOSEPH'S HOSPITAL	390132	PA
LEHIGH VALLEY HOSPITAL	390133	PA
WILKES-BARRE GENERAL HOSPITAL	390137	PA
WAYNESBORO HOSPITAL	390138	PA
BRYN MAWR HOSPITAL	390139	PA
ALBERT EINSTEIN MEDICAL CENTER	390142	PA
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL	390145	PA
WARREN GENERAL HOSPITAL	390146	PA
MONONGAHELA VALLEY HOSPITAL	390147	PA
SOUTHWEST REGIONAL MEDICAL CENTER	390150	PA
CHAMBERSBURG HOSPITAL	390151	PA
PAOLI HOSPITAL	390153	PA
ELK REGIONAL HEALTH CENTER	390154	PA
MERCY FITZGERALD HOSPITAL	390156	PA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





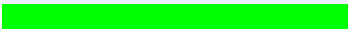
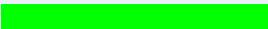
















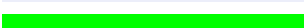
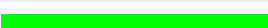
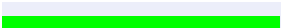
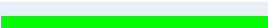








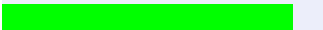
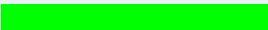


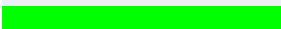
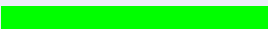


IP-Acute

Based on Spending Breakdown by Claim

	\$6882.00	\$8157.00	\$8294.00
	\$6984.00	\$8157.00	\$8294.00
	\$7645.00	\$8157.00	\$8294.00
	\$6654.00	\$8157.00	\$8294.00
	\$7051.00	\$8157.00	\$8294.00
	\$7942.00	\$8157.00	\$8294.00
	\$6471.00	\$8157.00	\$8294.00
	\$7119.00	\$8157.00	\$8294.00
	\$9031.00	\$8157.00	\$8294.00
	\$7537.00	\$8157.00	\$8294.00
	\$6665.00	\$8157.00	\$8294.00
	\$7886.00	\$8157.00	\$8294.00
	\$7903.00	\$8157.00	\$8294.00
	\$7327.00	\$8157.00	\$8294.00
	\$6880.00	\$8157.00	\$8294.00
	\$6858.00	\$8157.00	\$8294.00
	\$6468.00	\$8157.00	\$8294.00
	\$7659.00	\$8157.00	\$8294.00
	\$7498.00	\$8157.00	\$8294.00
	\$6184.00	\$8157.00	\$8294.00
	\$6919.00	\$8157.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	47.3%		43.14%
	35.63%		43.14%
	49.32%		43.14%
	37.16%		43.14%
	40.49%		43.14%
	41.74%		43.14%
	40.01%		43.14%
	41.7%		43.14%
	45.61%		43.14%
	35.91%		43.14%
	42.78%		43.14%
	43%		43.14%
	39.46%		43.14%
	39.12%		43.14%
	44.08%		43.14%
	41.09%		43.14%
	41.32%		43.14%
	45.8%		43.14%
	40.63%		43.14%
	39.17%		43.14%
	37.95%		43.14%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

OHIO VALLEY GENERAL HOSPITAL	390157	PA
CANONSBURG GENERAL HOSPITAL	390160	PA
EASTON HOSPITAL	390162	PA
ACMH HOSPITAL	390163	PA
UPMC PRESBYTERIAN SHADYSIDE	390164	PA
BUTLER MEMORIAL HOSPITAL	390168	PA
INDIANA REGIONAL MEDICAL CENTER	390173	PA
THOMAS JEFFERSON UNIVERSITY HOSPITAL	390174	PA
UPMC HORIZON	390178	PA
CHESTER COUNTY HOSPITAL	390179	PA
CROZER CHESTER MEDICAL CENTER	390180	PA
ST LUKES HOSPITAL - MINERS CAMPUS	390183	PA
HIGHLANDS HOSPITAL	390184	PA
HAZLETON GENERAL HOSPITAL	390185	PA
TYLER MEMORIAL HOSPITAL	390192	PA
GNADEN HUETTEN MEMORIAL HOSPITAL	390194	PA
MAIN LINE HOSPITAL LANKENAU	390195	PA
SACRED HEART HOSPITAL	390197	PA
MILLCREEK COMMUNITY HOSPITAL	390198	PA
PUNXSUTAWNEY AREA HOSPITAL	390199	PA
POCONO MEDICAL CENTER	390201	PA
DOYLESTOWN HOSPITAL	390203	PA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





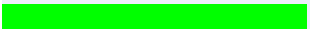
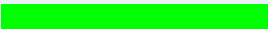
















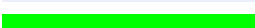
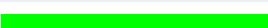
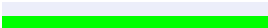
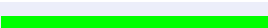
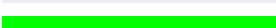
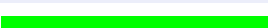
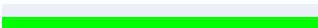
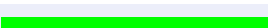
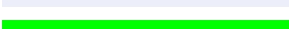
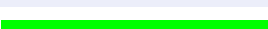
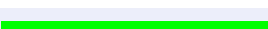
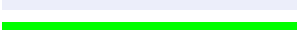
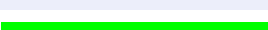
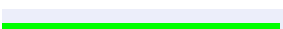
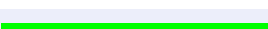
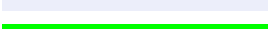
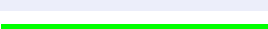


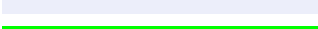
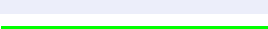
IP-Acute

Based on Spending Breakdown by Claim

\$6786.00	\$8157.00	\$8294.00
\$7458.00	\$8157.00	\$8294.00
\$7719.00	\$8157.00	\$8294.00
\$7076.00	\$8157.00	\$8294.00
\$10258.00	\$8157.00	\$8294.00
\$8188.00	\$8157.00	\$8294.00
\$6652.00	\$8157.00	\$8294.00
\$9155.00	\$8157.00	\$8294.00
\$7043.00	\$8157.00	\$8294.00
\$7877.00	\$8157.00	\$8294.00
\$7567.00	\$8157.00	\$8294.00
\$6347.00	\$8157.00	\$8294.00
\$5972.00	\$8157.00	\$8294.00
\$7835.00	\$8157.00	\$8294.00
\$5366.00	\$8157.00	\$8294.00
\$6352.00	\$8157.00	\$8294.00
\$8457.00	\$8157.00	\$8294.00
\$7619.00	\$8157.00	\$8294.00
\$5312.00	\$8157.00	\$8294.00
\$5380.00	\$8157.00	\$8294.00
\$7283.00	\$8157.00	\$8294.00
\$7876.00	\$8157.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	31.65%		43.14%
	39.91%		43.14%
	43.28%		43.14%
	42.83%		43.14%
	47.91%		43.14%
	46.46%		43.14%
	38.95%		43.14%
	45.89%		43.14%
	43.79%		43.14%
	42.76%		43.14%
	40.79%		43.14%
	36.11%		43.14%
	37.79%		43.14%
	38.79%		43.14%
	45.2%		43.14%
	40.8%		43.14%
	46.1%		43.14%
	41.96%		43.14%
	39.4%		43.14%
	38.07%		43.14%
	41.09%		43.14%
	45.42%		43.14%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

NAZARETH HOSPITAL	390204	PA
SHARON REGIONAL HEALTH SYSTEM	390211	PA
EXCELA HEALTH - FRICK HOSPITAL	390217	PA
EXCELA HEALTH LATROBE HOSPITAL	390219	PA
JENNERSVILLE REGIONAL HOSPITAL	390220	PA
RIDDLE MEMORIAL HOSPITAL	390222	PA
PENN PRESBYTERIAN MEDICAL CENTER	390223	PA
EPHRATA COMMUNITY HOSPITAL	390225	PA
PENNSYLVANIA HOSPITAL	390226	PA
ST CLAIR MEMORIAL HOSPITAL	390228	PA
ABINGTON MEMORIAL HOSPITAL	390231	PA
HANOVER HOSPITAL	390233	PA
MEMORIAL HOSPITAL, INC TOWANDA	390236	PA
REGIONAL HOSPITAL OF SCRANTON	390237	PA
MILTON S HERSHEY MEDICAL CENTER	390256	PA
ST MARY MEDICAL CENTER	390258	PA
LEHIGH VALLEY HOSPITAL - MUHLENBERG	390263	PA
JEFFERSON REGIONAL MEDICAL CENTER	390265	PA
GROVE CITY MEDICAL CENTER	390266	PA
THE WESTERN PENNSYLVANIA HOSPITAL- FORBES REGIONAL CAMPUS	390267	PA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7111.00	\$8157.00	\$8294.00
\$7476.00	\$8157.00	\$8294.00
\$6862.00	\$8157.00	\$8294.00
\$7095.00	\$8157.00	\$8294.00
\$6090.00	\$8157.00	\$8294.00
\$7789.00	\$8157.00	\$8294.00
\$9857.00	\$8157.00	\$8294.00
\$7372.00	\$8157.00	\$8294.00
\$9870.00	\$8157.00	\$8294.00
\$7884.00	\$8157.00	\$8294.00
\$8195.00	\$8157.00	\$8294.00
\$7969.00	\$8157.00	\$8294.00
\$5789.00	\$8157.00	\$8294.00
\$8141.00	\$8157.00	\$8294.00
\$9841.00	\$8157.00	\$8294.00
\$7827.00	\$8157.00	\$8294.00
\$7795.00	\$8157.00	\$8294.00
\$8148.00	\$8157.00	\$8294.00
\$6473.00	\$8157.00	\$8294.00
\$8029.00	\$8157.00	\$8294.00

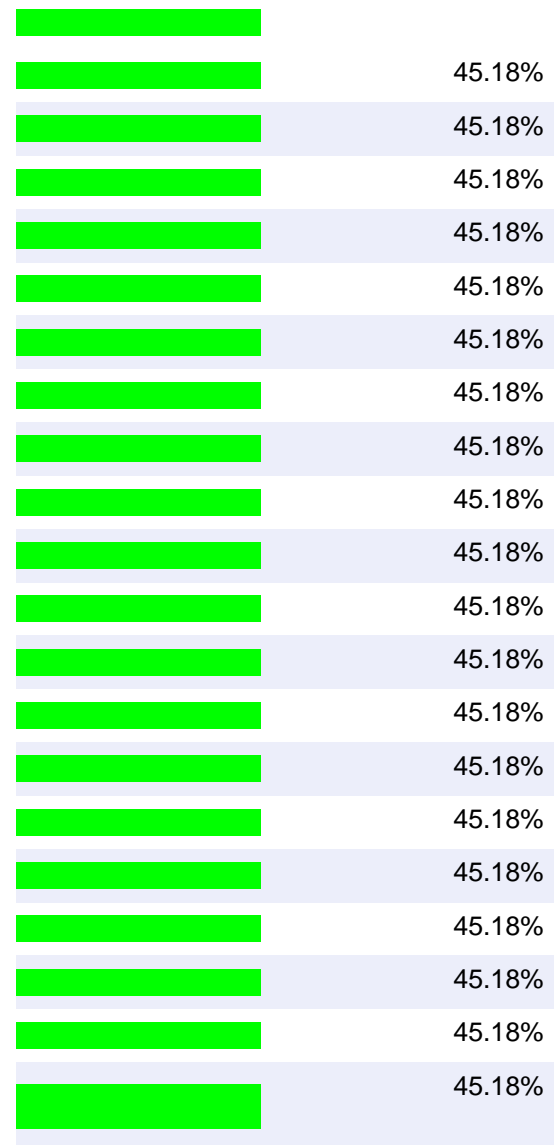
IP-Acute

Based on Spending Breakdown by Claim

	35.9%		43.14%
	42.96%		43.14%
	35.89%		43.14%
	39.18%		43.14%
	37.55%		43.14%
	42.1%		43.14%
	49.44%		43.14%
	41.22%		43.14%
	49.6%		43.14%
	40.8%		43.14%
	43.8%		43.14%
	44.03%		43.14%
	45%		43.14%
	43.84%		43.14%
	48%		43.14%
	43.49%		43.14%
	44.06%		43.14%
	42.26%		43.14%
	37.4%		43.14%
	38.84%		43.14%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

MOUNT NITTANY MEDICAL CENTER	390268	PA
GEISINGER WYOMING VALLEY MEDICAL CENTER	390270	PA
VALLEY FORGE MEDICAL CENTER AND HOSPITAL	390272	PA
EAGLEVILLE HOSPITAL	390278	PA
HAHNEMANN UNIVERSITY HOSPITAL	390290	PA
ROXBOROUGH MEMORIAL HOSPITAL	390304	PA
CANCER TREATMENT CENTERS OF AMERICA	390312	PA
COORDINATED HEALTH ORTHOPEDIC HOSPITAL	390314	PA
SURGICAL INSTITUTE OF READING	390316	PA
WESTFIELD HOSPITAL	390318	PA
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH	390321	PA
ROTHMAN SPECIALTY HOSPITAL	390322	PA
ADVANCED SURGICAL HOSPITAL	390323	PA
OSS ORTHOPAEDIC HOSPITAL	390325	PA
MEMORIAL HOSPITAL OF RHODE ISLAND	410001	RI
ROGER WILLIAMS MEDICAL CENTER	410004	RI
OUR LADY OF FATIMA HOSPITAL	410005	RI
NEWPORT HOSPITAL	410006	RI
RHODE ISLAND HOSPITAL	410007	RI
SOUTH COUNTY HOSPITAL INC	410008	RI
KENT COUNTY MEMORIAL HOSPITAL	410009	RI

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





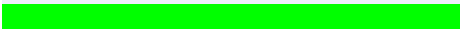
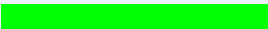
































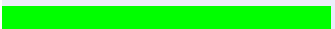
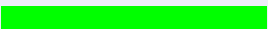


IP-Acute

Based on Spending Breakdown by Claim

\$9018.00	\$8157.00	\$8294.00
\$9465.00	\$8157.00	\$8294.00
\$3422.00	\$8157.00	\$8294.00
\$4826.00	\$8157.00	\$8294.00
\$8508.00	\$8157.00	\$8294.00
\$6562.00	\$8157.00	\$8294.00
\$12836.00	\$8157.00	\$8294.00
\$11935.00	\$8157.00	\$8294.00
\$11949.00	\$8157.00	\$8294.00
\$7628.00	\$8157.00	\$8294.00
\$11654.00	\$8157.00	\$8294.00
\$15227.00	\$8157.00	\$8294.00
\$11959.00	\$8157.00	\$8294.00
\$12502.00	\$8157.00	\$8294.00
\$6794.00	\$7797.00	\$8294.00
\$7538.00	\$7797.00	\$8294.00
\$7400.00	\$7797.00	\$8294.00
\$7866.00	\$7797.00	\$8294.00
\$8958.00	\$7797.00	\$8294.00
\$7685.00	\$7797.00	\$8294.00
\$7332.00	\$7797.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.85%		43.14%
	41.28%		43.14%
	65.06%		43.14%
	72.11%		43.14%
	43.83%		43.14%
	30.37%		43.14%
	52.49%		43.14%
	52.67%		43.14%
	59.41%		43.14%
	59.93%		43.14%
	51.52%		43.14%
	70.7%		43.14%
	51.08%		43.14%
	61.36%		43.14%
	39.55%		42.66%
	41.99%		42.66%
	38.79%		42.66%
	40.3%		42.66%
	46.65%		42.66%
	47.26%		42.66%
	38.89%		42.66%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

WOMEN AND INFANTS HOSPITAL OF RHODE ISLAND	410010	RI
LANDMARK MEDICAL CENTER, INC	410011	RI
MIRIAM HOSPITAL	410012	RI
WESTERLY HOSPITAL	410013	RI
PIEDMONT MEDICAL CENTER	420002	SC
MUSC MEDICAL CENTER	420004	SC
MCLEOD MEDICAL CENTER - DILLON	420005	SC
SPARTANBURG REGIONAL MEDICAL CENTER	420007	SC
OCONEE MEDICAL CENTER	420009	SC
CAROLINA PINES REGIONAL MEDICAL CENTER	420010	SC
CANNON MEMORIAL HOSPITAL	420011	SC
PALMETTO HEALTH BAPTIST EASLEY	420015	SC
BARNWELL COUNTY HOSPITAL	420016	SC
PALMETTO HEALTH RICHLAND	420018	SC
CHESTER REGIONAL MEDICAL CENTER	420019	SC
GEORGETOWN MEMORIAL HOSPITAL	420020	SC
ST FRANCIS-DOWNTOWN	420023	SC
SISTERS OF CHARITY PROVIDENCE HOSPITALS	420026	SC
ANMED HEALTH	420027	SC
COLLETON MEDICAL CENTER	420030	SC
GREER MEMORIAL HOSPITAL	420033	SC

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





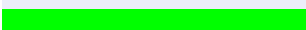
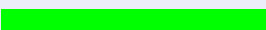
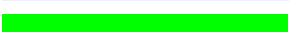
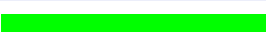
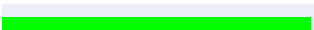
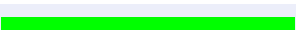


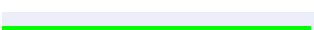
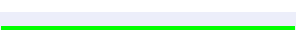


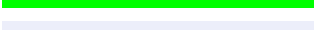
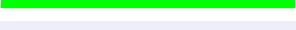
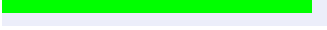
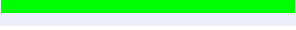












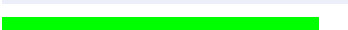
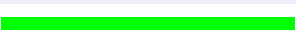
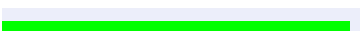
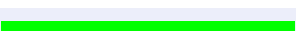


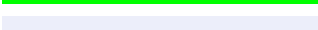
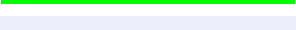
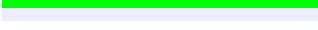
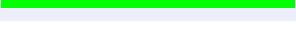
IP-Acute

Based on Spending Breakdown by Claim

\$6475.00	\$7797.00	\$8294.00
\$7372.00	\$7797.00	\$8294.00
\$7887.00	\$7797.00	\$8294.00
\$6865.00	\$7797.00	\$8294.00
\$8089.00	\$8423.00	\$8294.00
\$10869.00	\$8423.00	\$8294.00
\$6418.00	\$8423.00	\$8294.00
\$9161.00	\$8423.00	\$8294.00
\$7471.00	\$8423.00	\$8294.00
\$6749.00	\$8423.00	\$8294.00
\$6029.00	\$8423.00	\$8294.00
\$8128.00	\$8423.00	\$8294.00
\$4952.00	\$8423.00	\$8294.00
\$9564.00	\$8423.00	\$8294.00
\$6097.00	\$8423.00	\$8294.00
\$7340.00	\$8423.00	\$8294.00
\$9731.00	\$8423.00	\$8294.00
\$9781.00	\$8423.00	\$8294.00
\$8536.00	\$8423.00	\$8294.00
\$6985.00	\$8423.00	\$8294.00
\$7752.00	\$8423.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	52.88%		42.66%
	40.73%		42.66%
	43.12%		42.66%
	40.62%		42.66%
	43.89%		47.27%
	53.07%		47.27%
	43.87%		47.27%
	49.15%		47.27%
	43.99%		47.27%
	46.18%		47.27%
	43.15%		47.27%
	46.67%		47.27%
	36.2%		47.27%
	48.11%		47.27%
	45.58%		47.27%
	44.98%		47.27%
	49.36%		47.27%
	51.17%		47.27%
	45.1%		47.27%
	45.28%		47.27%
	44.81%		47.27%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

SPRINGS MEMORIAL HOSPITAL	420036	SC
HILLCREST MEMORIAL HOSPITAL	420037	SC
LAURENS COUNTY HEALTHCARE SYSTEM	420038	SC
WALLACE THOMSON HOSPITAL	420039	SC
UPSTATE CAROLINA MEDICAL CENTER	420043	SC
KERSHAW HEALTH	420048	SC
CONWAY MEDICAL CENTER	420049	SC
MCLEOD REGIONAL MEDICAL CENTER-PEE DEE	420051	SC
NEWBERRY COUNTY MEMORIAL HOSPITAL	420053	SC
MARLBORO PARK HOSPITAL	420054	SC
MARION REGIONAL HOSPITAL	420055	SC
MCLEOD MEDICAL CENTER DARLINGTON	420057	SC
CHESTERFIELD GENERAL HOSPITAL	420062	SC
BON SECOURS-ST FRANCIS XAVIER HOSPITAL	420065	SC
LAKE CITY COMMUNITY HOSPITAL	420066	SC
BEAUFORT COUNTY MEMORIAL HOSPITAL	420067	SC
TRMC OF ORANGEBURG & CALHOUN	420068	SC
CLARENDON MEMORIAL HOSPITAL	420069	SC
TUOMEY HEALTHCARE SYSTEM	420070	SC
SELF REGIONAL HEALTHCARE	420071	SC
HAMPTON REGIONAL MEDICAL CENTER	420072	SC
LEXINGTON MEDICAL CENTER	420073	SC

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





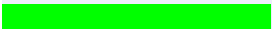
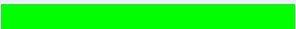
















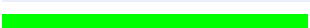
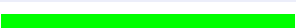
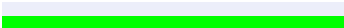
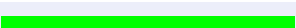
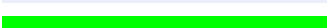
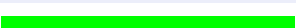
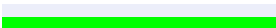
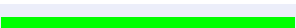
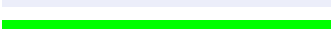
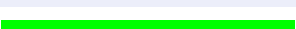
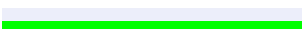
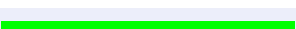
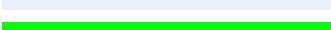
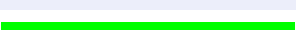
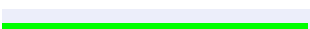
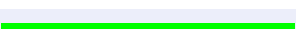
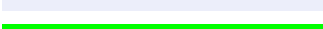
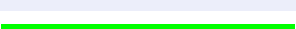


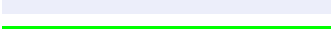
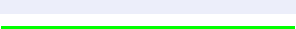
IP-Acute

Based on Spending Breakdown by Claim

\$5805.00	\$8423.00	\$8294.00
\$7118.00	\$8423.00	\$8294.00
\$7276.00	\$8423.00	\$8294.00
\$5681.00	\$8423.00	\$8294.00
\$6012.00	\$8423.00	\$8294.00
\$7179.00	\$8423.00	\$8294.00
\$7596.00	\$8423.00	\$8294.00
\$8936.00	\$8423.00	\$8294.00
\$7286.00	\$8423.00	\$8294.00
\$5032.00	\$8423.00	\$8294.00
\$5689.00	\$8423.00	\$8294.00
\$6050.00	\$8423.00	\$8294.00
\$5766.00	\$8423.00	\$8294.00
\$9087.00	\$8423.00	\$8294.00
\$5551.00	\$8423.00	\$8294.00
\$7473.00	\$8423.00	\$8294.00
\$8031.00	\$8423.00	\$8294.00
\$6644.00	\$8423.00	\$8294.00
\$7173.00	\$8423.00	\$8294.00
\$8001.00	\$8423.00	\$8294.00
\$5682.00	\$8423.00	\$8294.00
\$8580.00	\$8423.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.97%		47.27%
	47.22%		47.27%
	38.2%		47.27%
	43.26%		47.27%
	44.76%		47.27%
	43.64%		47.27%
	45.55%		47.27%
	50.6%		47.27%
	43.66%		47.27%
	40.52%		47.27%
	44.86%		47.27%
	43.33%		47.27%
	48.57%		47.27%
	46.1%		47.27%
	39.2%		47.27%
	46.64%		47.27%
	42.6%		47.27%
	46.7%		47.27%
	43.44%		47.27%
	45.66%		47.27%
	46.33%		47.27%
	47.09%		47.27%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

GREENVILLE MEMORIAL HOSPITAL	420078	SC
TRIDENT MEDICAL CENTER	420079	SC
HILTON HEAD REGIONAL MEDICAL CENTER	420080	SC
AIKEN REGIONAL MEDICAL CENTER	420082	SC
MARY BLACK MEMORIAL HOSPITAL	420083	SC
GRAND STRAND REGIONAL MEDICAL CENTER	420085	SC
PALMETTO HEALTH BAPTIST	420086	SC
ROPER HOSPITAL	420087	SC
EAST COOPER MEDICAL CENTER	420089	SC
CAROLINAS HOSPITAL SYSTEM	420091	SC
WACCAMAW COMMUNITY HOSPITAL	420098	SC
COASTAL CAROLINA HOSPITAL	420101	SC
PATEWOOD MEMORIAL HOSPITAL	420102	SC
VILLAGE HOSPITAL	420103	SC
MOUNT PLEASANT HOSPITAL	420104	SC
PRAIRIE LAKES HEALTHCARE SYSTEM, INC	430005	SD
BROOKINGS HOSPITAL	430008	SD
AVERA SACRED HEART HOSPITAL	430012	SD
AVERA QUEEN OF PEACE	430013	SD
AVERA ST LUKES	430014	SD
ST MARY'S HOSPITAL	430015	SD

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$10177.00	\$8423.00	\$8294.00
\$8137.00	\$8423.00	\$8294.00
\$7816.00	\$8423.00	\$8294.00
\$7758.00	\$8423.00	\$8294.00
\$7959.00	\$8423.00	\$8294.00
\$8542.00	\$8423.00	\$8294.00
\$9196.00	\$8423.00	\$8294.00
\$9858.00	\$8423.00	\$8294.00
\$10336.00	\$8423.00	\$8294.00
\$8036.00	\$8423.00	\$8294.00
\$6892.00	\$8423.00	\$8294.00
\$5758.00	\$8423.00	\$8294.00
\$11335.00	\$8423.00	\$8294.00
\$8109.00	\$8423.00	\$8294.00
\$6956.00	\$8423.00	\$8294.00
\$7744.00	\$9190.00	\$8294.00
\$6403.00	\$9190.00	\$8294.00
\$7422.00	\$9190.00	\$8294.00
\$7279.00	\$9190.00	\$8294.00
\$8119.00	\$9190.00	\$8294.00
\$7797.00	\$9190.00	\$8294.00

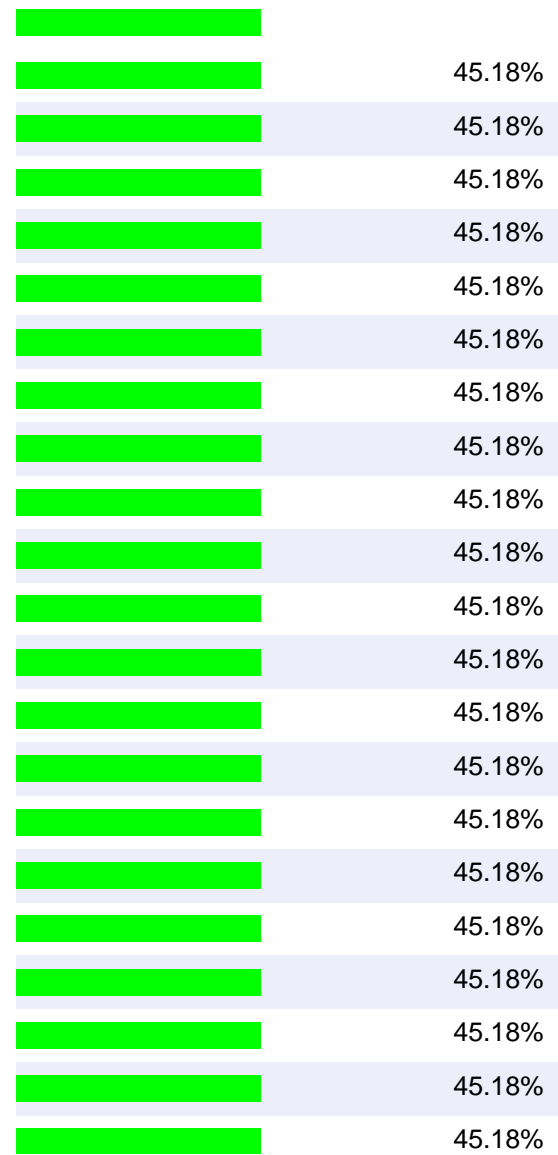
IP-Acute

Based on Spending Breakdown by Claim

	49.92%		47.27%
	45.68%		47.27%
	45.31%		47.27%
	45.73%		47.27%
	45.62%		47.27%
	50.03%		47.27%
	49.55%		47.27%
	49.55%		47.27%
	48.66%		47.27%
	46.12%		47.27%
	44.57%		47.27%
	38.77%		47.27%
	58.41%		47.27%
	48.72%		47.27%
	42.03%		47.27%
	48.78%		50.99%
	47.86%		50.99%
	45.92%		50.99%
	45.07%		50.99%
	44.84%		50.99%
	52.21%		50.99%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

AVERA MCKENNAN HOSPITAL & UNIVERSITY HEALTH CENTER	430016	SD
SANFORD USD MEDICAL CENTER	430027	SD
SPEARFISH REGIONAL HOSPITAL	430048	SD
RAPID CITY REGIONAL HOSPITAL	430077	SD
PHS INDIAN HOSPITAL AT PINE RIDGE	430081	SD
PHS INDIAN HOSPITAL AT ROSEBUD	430084	SD
SIOUXLAND SURGERY CENTER LP	430089	SD
SIOUX FALLS SPECIALTY HOSPITAL	430090	SD
BLACK HILLS SURGICAL HOSPITAL LLP	430091	SD
DAKOTA PLAINS SURGICAL CENTER LLP	430092	SD
AVERA HEART HOSPITAL OF SOUTH DAKOTA LLC	430095	SD
LEWIS AND CLARK SPECIALTY HOSPITAL	430096	SD
UNICOI COUNTY MEMORIAL HOSPITAL	440001	TN
JACKSON-MADISON COUNTY GENERAL HOSPITAL	440002	TN
SUMNER REGIONAL MEDICAL CENTER	440003	TN
SKYLINE MEDICAL CENTER	440006	TN
UNITED REGIONAL MEDICAL CENTER	440007	TN
HENDERSON COUNTY COMMUNITY HOSPITAL	440008	TN
CUMBERLAND MEDICAL CENTER	440009	TN
WAYNE MEDICAL CENTER	440010	TN

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

	\$8257.00	\$9190.00	\$8294.00
	\$9632.00	\$9190.00	\$8294.00
	\$7428.00	\$9190.00	\$8294.00
	\$9045.00	\$9190.00	\$8294.00
	\$5356.00	\$9190.00	\$8294.00
	\$4643.00	\$9190.00	\$8294.00
	\$13723.00	\$9190.00	\$8294.00
	\$13170.00	\$9190.00	\$8294.00
	\$11942.00	\$9190.00	\$8294.00
	\$12368.00	\$9190.00	\$8294.00
	\$13111.00	\$9190.00	\$8294.00
	\$11050.00	\$9190.00	\$8294.00
	\$6292.00	\$8406.00	\$8294.00
	\$8990.00	\$8406.00	\$8294.00
	\$6863.00	\$8406.00	\$8294.00
	\$8403.00	\$8406.00	\$8294.00
	\$6462.00	\$8406.00	\$8294.00
	\$5331.00	\$8406.00	\$8294.00
	\$7051.00	\$8406.00	\$8294.00
	\$5095.00	\$8406.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	47.34%		50.99%
	51.96%		50.99%
	47.29%		50.99%
	49.72%		50.99%
	49.29%		50.99%
	43.55%		50.99%
	65.6%		50.99%
	66.57%		50.99%
	63.1%		50.99%
	57.48%		50.99%
	59.72%		50.99%
	51.88%		50.99%
	43.31%		45.73%
	44.66%		45.73%
	39.23%		45.73%
	43.54%		45.73%
	43.68%		45.73%
	36.1%		45.73%
	45.69%		45.73%
	54.76%		45.73%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

BLOUNT MEMORIAL HOSPITAL	440011	TN
WELLMONT BRISTOL REGIONAL MEDICAL CENTER	440012	TN
UNIVERSITY OF TN MEMORIAL HOSPITAL	440015	TN
BAPTIST MEMORIAL HOSPITAL HUNTINGDON	440016	TN
WELLMONT HOLSTON VALLEY MEDICAL CENTER	440017	TN
SYCAMORE SHOALS HOSPITAL	440018	TN
HILLSIDE HOSPITAL	440020	TN
LAUGHLIN MEMORIAL HOSPITAL, INC	440025	TN
WILLIAMSON MEDICAL CENTER	440029	TN
MORRISTOWN HAMBLÉN HOSPITAL ASSOCIATION	440030	TN
ROANE MEDICAL CENTER	440031	TN
WELLMONT HAWKINS COUNTY MEMORIAL HOSPITAL	440032	TN
LAFOLLETTE MEDICAL CENTER	440033	TN
METHODIST MEDICAL CENTER OF OAK RIDGE	440034	TN
GATEWAY MEDICAL CENTER	440035	TN
VANDERBILT UNIVERSITY HOSPITAL	440039	TN
PERRY COMMUNITY HOSPITAL	440040	TN
HORIZON MEDICAL CENTER	440046	TN
GIBSON GENERAL HOSPITAL	440047	TN
BAPTIST MEMORIAL HOSPITAL	440048	TN

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

































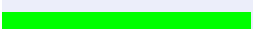
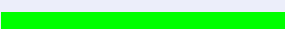


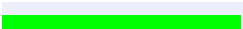
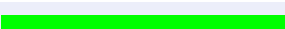
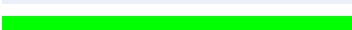
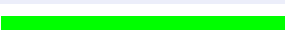
IP-Acute

Based on Spending Breakdown by Claim

\$7147.00	\$8406.00	\$8294.00
\$7600.00	\$8406.00	\$8294.00
\$10163.00	\$8406.00	\$8294.00
\$5411.00	\$8406.00	\$8294.00
\$8454.00	\$8406.00	\$8294.00
\$5590.00	\$8406.00	\$8294.00
\$6640.00	\$8406.00	\$8294.00
\$6835.00	\$8406.00	\$8294.00
\$8681.00	\$8406.00	\$8294.00
\$7252.00	\$8406.00	\$8294.00
\$6361.00	\$8406.00	\$8294.00
\$6865.00	\$8406.00	\$8294.00
\$5890.00	\$8406.00	\$8294.00
\$9017.00	\$8406.00	\$8294.00
\$7400.00	\$8406.00	\$8294.00
\$11496.00	\$8406.00	\$8294.00
\$4931.00	\$8406.00	\$8294.00
\$7816.00	\$8406.00	\$8294.00
\$5031.00	\$8406.00	\$8294.00
\$9641.00	\$8406.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.5%		45.73%
	43.19%		45.73%
	48.89%		45.73%
	33.57%		45.73%
	45.39%		45.73%
	37.22%		45.73%
	37.95%		45.73%
	42.65%		45.73%
	44.25%		45.73%
	42.97%		45.73%
	38.66%		45.73%
	47.76%		45.73%
	40.87%		45.73%
	47.77%		45.73%
	43.77%		45.73%
	52.62%		45.73%
	35.35%		45.73%
	40.14%		45.73%
	33.91%		45.73%
	49.73%		45.73%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

METHODIST HEALTHCARE MEMPHIS HOSPITALS	440049	TN
TAKOMA REGIONAL HOSPITAL	440050	TN
MCNAIRY REGIONAL HOSPITAL	440051	TN
MIDDLE TENNESSEE MEDICAL CENTER INC	440053	TN
WOODS MEMORIAL HOSPITAL	440054	TN
TENNOVA HEALTHCARE-JEFFERSON MEMORIAL HOSPITAL	440056	TN
CLAIBORNE COUNTY HOSPITAL	440057	TN
SOUTHERN TENNESSEE MEDICAL CENTER	440058	TN
COOKEVILLE REGIONAL MEDICAL CENTER	440059	TN
MILAN GENERAL HOSPITAL	440060	TN
VOLUNTEER COMMUNITY HOSPITAL	440061	TN
JOHNSON CITY MEDICAL CENTER	440063	TN
GRANDVIEW MEDICAL CENTER	440064	TN
NORTHCREST MEDICAL CENTER	440065	TN
LAKEWAY REGIONAL HOSPITAL	440067	TN
ATHENS REGIONAL MEDICAL CENTER	440068	TN
DECATUR COUNTY GENERAL HOSPITAL	440070	TN
DYERSBURG REGIONAL MEDICAL CENTER	440072	TN
MAURY REGIONAL HOSPITAL	440073	TN
LECONTE MEDICAL CENTER	440081	TN
ST THOMAS HOSPITAL	440082	TN

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

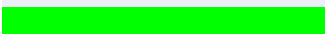
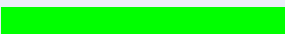


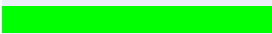
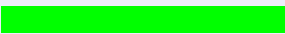






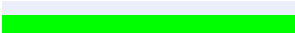
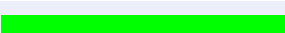
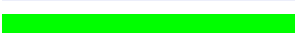
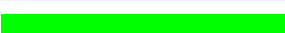
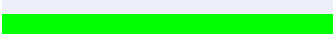
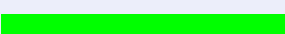














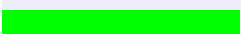
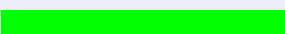


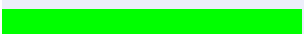
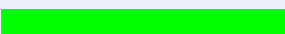


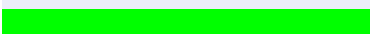
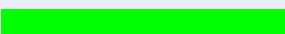
IP-Acute

Based on Spending Breakdown by Claim

	\$9113.00	\$8406.00	\$8294.00
	\$6591.00	\$8406.00	\$8294.00
	\$4929.00	\$8406.00	\$8294.00
	\$7491.00	\$8406.00	\$8294.00
	\$6440.00	\$8406.00	\$8294.00
	\$5866.00	\$8406.00	\$8294.00
	\$6745.00	\$8406.00	\$8294.00
	\$6489.00	\$8406.00	\$8294.00
	\$8495.00	\$8406.00	\$8294.00
	\$7165.00	\$8406.00	\$8294.00
	\$5823.00	\$8406.00	\$8294.00
	\$9146.00	\$8406.00	\$8294.00
	\$5607.00	\$8406.00	\$8294.00
	\$7846.00	\$8406.00	\$8294.00
	\$6201.00	\$8406.00	\$8294.00
	\$6482.00	\$8406.00	\$8294.00
	\$5041.00	\$8406.00	\$8294.00
	\$5930.00	\$8406.00	\$8294.00
	\$8343.00	\$8406.00	\$8294.00
	\$7660.00	\$8406.00	\$8294.00
	\$10411.00	\$8406.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	45.76%		45.73%
	44%		45.73%
	38.43%		45.73%
	43.46%		45.73%
	48.65%		45.73%
	36.87%		45.73%
	41.49%		45.73%
	41.69%		45.73%
	47.03%		45.73%
	44.34%		45.73%
	35.07%		45.73%
	47.58%		45.73%
	40.62%		45.73%
	44.03%		45.73%
	37.71%		45.73%
	42.56%		45.73%
	33.7%		45.73%
	36.94%		45.73%
	42.49%		45.73%
	47.82%		45.73%
	52.28%		45.73%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

JAMESTOWN REGIONAL MEDICAL CENTER	440083	TN
SWEETWATER HOSPITAL ASSOCIATION	440084	TN
MEMORIAL HEALTHCARE SYSTEM, INC	440091	TN
LINCOLN MEDICAL CENTER	440102	TN
ERLANGER MEDICAL CENTER	440104	TN
HARDIN MEDICAL CENTER	440109	TN
FORT LOUDOUN MEDICAL CENTER	440110	TN
METRO NASHVILLE GENERAL HOSPITAL	440111	TN
HUMBOLDT GENERAL HOSPITAL INC	440115	TN
PHYSICIANS REGIONAL MEDICAL CENTER	440120	TN
FORT SANDERS REGIONAL MEDICAL CENTER	440125	TN
BAPTIST MEMORIAL HOSPITAL UNION CITY	440130	TN
BAPTIST MEMORIAL HOSPITAL TIPTON	440131	TN
HENRY COUNTY MEDICAL CENTER	440132	TN
BAPTIST HOSPITAL	440133	TN
HERITAGE MEDICAL CENTER	440137	TN
CUMBERLAND RIVER HOSPITAL	440141	TN
HARTON REGIONAL MEDICAL CENTER	440144	TN
DEKALB COMMUNITY HOSPITAL	440148	TN
SUMMIT MEDICAL CENTER	440150	TN
RIVER PARK HOSPITAL	440151	TN
REGIONAL MEDICAL CENTER AT MEMPHIS	440152	TN

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





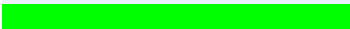
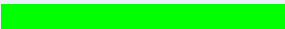
















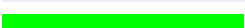
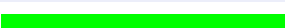
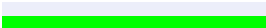
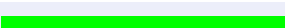
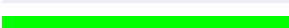
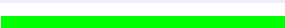
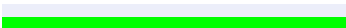
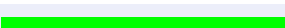
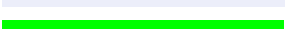
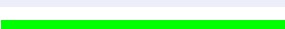
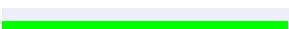
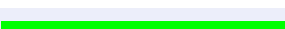
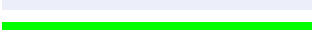
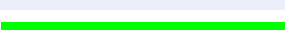
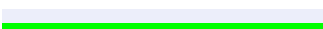
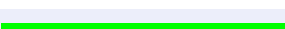
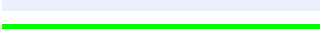
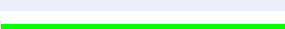


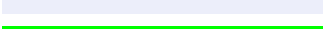
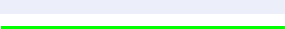
IP-Acute

Based on Spending Breakdown by Claim

\$5244.00	\$8406.00	\$8294.00
\$5978.00	\$8406.00	\$8294.00
\$9314.00	\$8406.00	\$8294.00
\$5733.00	\$8406.00	\$8294.00
\$9062.00	\$8406.00	\$8294.00
\$6258.00	\$8406.00	\$8294.00
\$7255.00	\$8406.00	\$8294.00
\$7449.00	\$8406.00	\$8294.00
\$5235.00	\$8406.00	\$8294.00
\$8826.00	\$8406.00	\$8294.00
\$9122.00	\$8406.00	\$8294.00
\$6220.00	\$8406.00	\$8294.00
\$5563.00	\$8406.00	\$8294.00
\$7471.00	\$8406.00	\$8294.00
\$9663.00	\$8406.00	\$8294.00
\$5935.00	\$8406.00	\$8294.00
\$5301.00	\$8406.00	\$8294.00
\$7381.00	\$8406.00	\$8294.00
\$6261.00	\$8406.00	\$8294.00
\$7936.00	\$8406.00	\$8294.00
\$6326.00	\$8406.00	\$8294.00
\$11492.00	\$8406.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	41.94%		45.73%
	37.55%		45.73%
	49.64%		45.73%
	41.52%		45.73%
	42.46%		45.73%
	41.02%		45.73%
	47.75%		45.73%
	41.85%		45.73%
	39.2%		45.73%
	49.81%		45.73%
	47.42%		45.73%
	34.24%		45.73%
	37.47%		45.73%
	40.65%		45.73%
	48.92%		45.73%
	40.01%		45.73%
	40.57%		45.73%
	44.02%		45.73%
	45.55%		45.73%
	45.25%		45.73%
	39.63%		45.73%
	45.6%		45.73%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

NEWPORT MEDICAL CENTER	440153	TN
PARKRIDGE MEDICAL CENTER	440156	TN
DELTA MEDICAL CENTER	440159	TN
CENTENNIAL MEDICAL CENTER	440161	TN
METHODIST HEALTHCARE FAYETTE HOSPITAL	440168	TN
PARKWEST MEDICAL CENTER	440173	TN
HAYWOOD PARK COMMUNITY HOSPITAL	440174	TN
CROCKETT HOSPITAL	440175	TN
INDIAN PATH MEDICAL CENTER	440176	TN
JELLICO COMMUNITY HOSPITAL	440180	TN
BOLIVAR GENERAL HOSPITAL	440181	TN
MCKENZIE REGIONAL HOSPITAL	440182	TN
ST FRANCIS HOSPITAL	440183	TN
FRANKLIN WOODS COMMUNITY HOSPITAL	440184	TN
SKYRIDGE MEDICAL CENTER	440185	TN
RIVERVIEW REGIONAL MEDICAL CENTER NORTH	440186	TN
LIVINGSTON REGIONAL HOSPITAL	440187	TN
REGIONAL HOSPITAL OF JACKSON	440189	TN
WHITE COUNTY COMMUNITY HOSPITAL	440192	TN
UNIVERSITY MEDICAL CENTER	440193	TN
HENDERSONVILLE MEDICAL CENTER	440194	TN

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$5864.00	\$8406.00	\$8294.00
\$8753.00	\$8406.00	\$8294.00
\$6757.00	\$8406.00	\$8294.00
\$10786.00	\$8406.00	\$8294.00
\$5000.00	\$8406.00	\$8294.00
\$9566.00	\$8406.00	\$8294.00
\$4433.00	\$8406.00	\$8294.00
\$5456.00	\$8406.00	\$8294.00
\$8009.00	\$8406.00	\$8294.00
\$6279.00	\$8406.00	\$8294.00
\$5367.00	\$8406.00	\$8294.00
\$5066.00	\$8406.00	\$8294.00
\$8500.00	\$8406.00	\$8294.00
\$5721.00	\$8406.00	\$8294.00
\$6530.00	\$8406.00	\$8294.00
\$5009.00	\$8406.00	\$8294.00
\$5458.00	\$8406.00	\$8294.00
\$7847.00	\$8406.00	\$8294.00
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\$7548.00	\$8406.00	\$8294.00

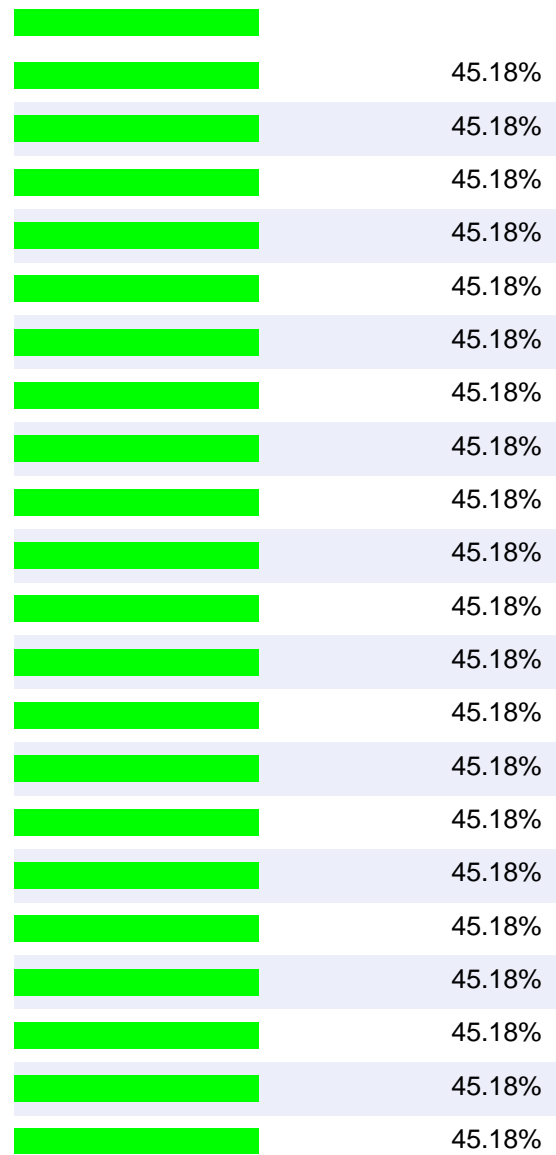
IP-Acute

Based on Spending Breakdown by Claim

	50.21%		45.73%
	49.13%		45.73%
	35.73%		45.73%
	51.33%		45.73%
	33.16%		45.73%
	49.32%		45.73%
	35.32%		45.73%
	39.76%		45.73%
	46.88%		45.73%
	48.07%		45.73%
	35.48%		45.73%
	33.57%		45.73%
	42.59%		45.73%
	43.51%		45.73%
	40.58%		45.73%
	31.05%		45.73%
	37.08%		45.73%
	46.32%		45.73%
	39.17%		45.73%
	39.92%		45.73%
	43.41%		45.73%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

SOUTHERN HILLS MEDICAL CTR	440197	TN
STONES RIVER HOSPITAL	440200	TN
THE CENTER FOR SPINAL SURGERY	440218	TN
STONECREST MEDICAL CENTER	440227	TN
SAINT FRANCIS BARTLETT MEDICAL CENTER	440228	TN
PROVIDENCE MEMORIAL HOSPITAL	450002	TX
MEMORIAL HERMANN BAPTIST ORANGE HOSPITAL	450005	TX
PETERSON REGIONAL MEDICAL CENTER	450007	TX
UNITED REGIONAL HEALTH CARE SYSTEM	450010	TX
ST. JOSEPH REGIONAL HEALTH CENTER	450011	TX
PARKLAND HEALTH AND HOSPITAL SYSTEM	450015	TX
UNIVERSITY OF TEXAS MEDICAL BRANCH GALVESTON	450018	TX
BAYLOR UNIVERSITY MEDICAL CENTER	450021	TX
CITIZENS MEDICAL CENTER	450023	TX
UNIVERSITY MEDICAL CENTER OF EL PASO	450024	TX
VHS BROWNSVILLE HOSPITAL COMPANY, LLC	450028	TX
LAREDO MEDICAL CENTER	450029	TX
GOOD SHEPHERD MEDICAL CENTER - MARSHALL	450032	TX
VHS HARLINGEN HOSPITAL COMPANY LLC	450033	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$8015.00	\$8406.00	\$8294.00
\$6352.00	\$8406.00	\$8294.00
\$14462.00	\$8406.00	\$8294.00
\$7988.00	\$8406.00	\$8294.00
\$7921.00	\$8406.00	\$8294.00
\$7992.00	\$8491.00	\$8294.00
\$6707.00	\$8491.00	\$8294.00
\$7734.00	\$8491.00	\$8294.00
\$8094.00	\$8491.00	\$8294.00
\$7997.00	\$8491.00	\$8294.00
\$8640.00	\$8491.00	\$8294.00
\$8976.00	\$8491.00	\$8294.00
\$10502.00	\$8491.00	\$8294.00
\$7424.00	\$8491.00	\$8294.00
\$7270.00	\$8491.00	\$8294.00
\$8124.00	\$8491.00	\$8294.00
\$7993.00	\$8491.00	\$8294.00
\$6949.00	\$8491.00	\$8294.00
\$8012.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	44.38%		45.73%
	38.35%		45.73%
	69.38%		45.73%
	43.33%		45.73%
	42.24%		45.73%
	42.68%		42.95%
	46.29%		42.95%
	40.6%		42.95%
	42.13%		42.95%
	44.97%		42.95%
	47.22%		42.95%
	47.7%		42.95%
	46.1%		42.95%
	43.67%		42.95%
	43.73%		42.95%
	37.56%		42.95%
	42.89%		42.95%
	42.14%		42.95%
	40.55%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

CHRISTUS ST. ELIZABETH HOSPITAL	450034	TX
ST JOSEPH MEDICAL CENTER	450035	TX
GOOD SHEPHERD MEDICAL CENTER	450037	TX
J.P.S. HEALTH NETWORK	450039	TX
COVENANT MEDICAL CENTER	450040	TX
PROVIDENCE HEALTH CENTER	450042	TX
NORTH HILLS HOSPITAL	450087	TX
U.T. SOUTHWESTERN UNIVERSITY HOSPITAL - ST. PAUL	450044	TX
CHRISTUS SPOHN HOSPITAL CORPUS CHRISTI	450046	TX
METHODIST DALLAS MEDICAL CENTER	450051	TX
GOODALL WITCHER HOSPITAL	450052	TX
SCOTT & WHITE MEMORIAL HOSPITAL	450054	TX
ROLLING PLAINS MEMORIAL HOSPITAL	450055	TX
SETON MEDICAL CENTER AUSTIN	450056	TX
BAPTIST MEDICAL CENTER	450058	TX
TEXAS HEALTH ARLINGTON MEMORIAL HOSPITAL	450064	TX
MEMORIAL HERMANN - TEXAS MEDICAL CENTER	450068	TX
BRAZOSPORT REGIONAL HEALTH SYSTEM	450072	TX
COGDELL MEMORIAL HOSPITAL	450073	TX
ANSON GENERAL HOSPITAL	450078	TX
BAYLOR MEDICAL CENTER AT IRVING	450079	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





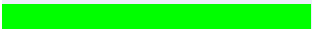
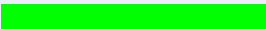




























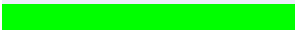
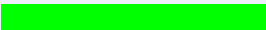


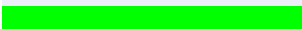
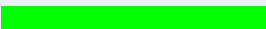


IP-Acute

Based on Spending Breakdown by Claim

\$8172.00	\$8491.00	\$8294.00
\$7898.00	\$8491.00	\$8294.00
\$8650.00	\$8491.00	\$8294.00
\$8673.00	\$8491.00	\$8294.00
\$9727.00	\$8491.00	\$8294.00
\$8929.00	\$8491.00	\$8294.00
\$8241.00	\$8491.00	\$8294.00
\$9257.00	\$8491.00	\$8294.00
\$8699.00	\$8491.00	\$8294.00
\$10075.00	\$8491.00	\$8294.00
\$5773.00	\$8491.00	\$8294.00
\$9708.00	\$8491.00	\$8294.00
\$5626.00	\$8491.00	\$8294.00
\$9230.00	\$8491.00	\$8294.00
\$8407.00	\$8491.00	\$8294.00
\$8332.00	\$8491.00	\$8294.00
\$10316.00	\$8491.00	\$8294.00
\$6390.00	\$8491.00	\$8294.00
\$5192.00	\$8491.00	\$8294.00
\$4452.00	\$8491.00	\$8294.00
\$8648.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.44%		42.95%
	41.82%		42.95%
	43.88%		42.95%
	42.48%		42.95%
	46.07%		42.95%
	47.98%		42.95%
	41.99%		42.95%
	46.65%		42.95%
	40.97%		42.95%
	46.45%		42.95%
	42.57%		42.95%
	47.97%		42.95%
	43.08%		42.95%
	46.66%		42.95%
	41.48%		42.95%
	36.75%		42.95%
	46.63%		42.95%
	41.64%		42.95%
	43.91%		42.95%
	42.63%		42.95%
	44.63%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

TITUS REGIONAL MEDICAL HOSPITAL	450080	TX
CHRISTUS SPOHN HOSPITAL BEEVILLE	450082	TX
EAST TEXAS MEDICAL CENTER	450083	TX
GRAHAM REGIONAL MEDICAL CENTER	450085	TX
NORTH TEXAS MEDICAL CENTER	450090	TX
FORT DUNCAN MEDICAL CENTER	450092	TX
BAYSHORE MEDICAL CENTER	450097	TX
PAMPA REGIONAL MEDICAL CENTER	450099	TX
HILLCREST BAPTIST MEDICAL CENTER	450101	TX
MOTHER FRANCES HOSPITAL REGIONAL HEALTH CARE CENTER	450102	TX
GUADALUPE REGIONAL MEDICAL CENTER	450104	TX
LAS PALMAS MEDICAL CENTER	450107	TX
CONNALLY MEMORIAL MEDICAL CENTER	450108	TX
SOUTH TEXAS HEALTH SYSTEM	450119	TX
UNIVERSITY MEDICAL CENTER AT BRACKENRIDGE	450124	TX
KNAPP MEDICAL CENTER	450128	TX
NIX HEALTH CARE SYSTEM	450130	TX
MEDICAL CENTER HOSPITAL	450132	TX
MIDLAND MEMORIAL HOSPITAL	450133	TX
TEXAS HEALTH HARRIS METHODIST FORT WORTH	450135	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





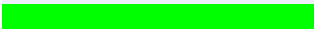
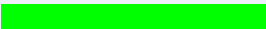






























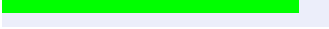
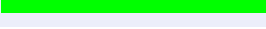


IP-Acute

Based on Spending Breakdown by Claim

\$7721.00	\$8491.00	\$8294.00
\$5877.00	\$8491.00	\$8294.00
\$8698.00	\$8491.00	\$8294.00
\$5930.00	\$8491.00	\$8294.00
\$6834.00	\$8491.00	\$8294.00
\$6638.00	\$8491.00	\$8294.00
\$7665.00	\$8491.00	\$8294.00
\$6624.00	\$8491.00	\$8294.00
\$8599.00	\$8491.00	\$8294.00
\$9655.00	\$8491.00	\$8294.00
\$7874.00	\$8491.00	\$8294.00
\$8439.00	\$8491.00	\$8294.00
\$5556.00	\$8491.00	\$8294.00
\$8190.00	\$8491.00	\$8294.00
\$8619.00	\$8491.00	\$8294.00
\$7252.00	\$8491.00	\$8294.00
\$6951.00	\$8491.00	\$8294.00
\$7557.00	\$8491.00	\$8294.00
\$9023.00	\$8491.00	\$8294.00
\$8979.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	40.16%		42.95%
	34.65%		42.95%
	44.28%		42.95%
	42.37%		42.95%
	36.14%		42.95%
	37.57%		42.95%
	34.16%		42.95%
	46.55%		42.95%
	45.81%		42.95%
	44.93%		42.95%
	40.12%		42.95%
	44.44%		42.95%
	35.07%		42.95%
	39.73%		42.95%
	41.34%		42.95%
	39.67%		42.95%
	42.07%		42.95%
	42.23%		42.95%
	46.71%		42.95%
	41.19%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

WORTH

BAYLOR ALL SAINTS MEDICAL CENTER AT FORT 450137 TX

WORTH

SETON SMITHVILLE REGIONAL HOSPITAL 450143 TX

PERMIAN REGIONAL MEDICAL CENTER ANDREWS 450144 TX

COUNTY HO

DE TAR HOSPITAL NAVARRO 450147 TX

TEXAS HEALTH HARRIS METHODIST HOSPITAL 450148 TX

CLEBURNE

METROPLEX HEALTH SYSTEM 450152 TX

VAL VERDE REGIONAL MEDICAL CENTER 450154 TX

HEREFORD REGIONAL MEDICAL CENTER 450155 TX

GRACE MEDICAL CENTER 450162 TX

CHRISTUS SPOHN HOSPITAL KLEBERG 450163 TX

SOUTH TEXAS REGIONAL MEDICAL CENTER 450165 TX

MISSION REGIONAL MEDICAL CENTER 450176 TX

UVALDE MEMORIAL HOSPITAL 450177 TX

PECOS COUNTY MEMORIAL HOSPITAL 450178 TX

MEMORIAL HERMANN HOSPITAL SYSTEM 450184 TX

SCOTT & WHITE HOSPITAL - BRENHAM 450187 TX

EAST TEXAS MEDICAL CENTER - CLARKSVILLE 450188 TX

HILL REGIONAL HOSPITAL 450192 TX

ST LUKES EPISCOPAL HOSPITAL 450193 TX

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

	\$9053.00	\$8491.00	\$8294.00
	\$5548.00	\$8491.00	\$8294.00
	\$5888.00	\$8491.00	\$8294.00
	\$7336.00	\$8491.00	\$8294.00
	\$7163.00	\$8491.00	\$8294.00
	\$7120.00	\$8491.00	\$8294.00
	\$6852.00	\$8491.00	\$8294.00
	\$4737.00	\$8491.00	\$8294.00
	\$11610.00	\$8491.00	\$8294.00
	\$5825.00	\$8491.00	\$8294.00
	\$5264.00	\$8491.00	\$8294.00
	\$7963.00	\$8491.00	\$8294.00
	\$5907.00	\$8491.00	\$8294.00
	\$4715.00	\$8491.00	\$8294.00
	\$8617.00	\$8491.00	\$8294.00
	\$6973.00	\$8491.00	\$8294.00
	\$4660.00	\$8491.00	\$8294.00
	\$5406.00	\$8491.00	\$8294.00
	\$10873.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.22%		42.95%
	38.48%		42.95%
	49.55%		42.95%
	39.77%		42.95%
	40.62%		42.95%
	44.79%		42.95%
	47.4%		42.95%
	39.21%		42.95%
	55.22%		42.95%
	40.52%		42.95%
	33.65%		42.95%
	38.82%		42.95%
	42.19%		42.95%
	52.06%		42.95%
	37.33%		42.95%
	49.97%		42.95%
	37.37%		42.95%
	41.4%		42.95%
	50.39%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

EAST TEXAS MEDICAL CENTER JACKSONVILLE	450194	TX
PARIS REGIONAL MEDICAL CENTER	450196	TX
WADLEY REGIONAL MEDICAL CENTER	450200	TX
WEATHERFORD REGIONAL MEDICAL CENTER	450203	TX
NORTHWEST TEXAS HOSPITAL	450209	TX
E. T. M. C. CARTHAGE	450210	TX
MEMORIAL MEDICAL CENTER OF EAST TEXAS	450211	TX
UNIVERSITY HOSPITAL	450213	TX
GULF COAST MEDICAL CENTER	450214	TX
SCOTT & WHITE HOSPITAL-LLANO	450219	TX
MOORE COUNTY HOSPITAL	450221	TX
CONROE REGIONAL MEDICAL CENTER	450222	TX
HENDRICK MEDICAL CENTER	450229	TX
BAPTIST ST ANTHONYS HEALTH SYSTEM- BAPTIST CAMPUS	450231	TX
MEMORIAL HOSPITAL	450235	TX
HOPKINS COUNTY MEMORIAL HOSPITAL	450236	TX
CHRISTUS SANTA ROSA HEALTHCARE	450237	TX
FAITH COMMUNITY HOSPITAL	450241	TX
HAMLIN MEMORIAL HOSPITAL	450243	TX
BELLVILLE GENERAL HOSPITAL	450253	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$6348.00	\$8491.00	\$8294.00
\$7872.00	\$8491.00	\$8294.00
\$8870.00	\$8491.00	\$8294.00
\$6769.00	\$8491.00	\$8294.00
\$9211.00	\$8491.00	\$8294.00
\$4981.00	\$8491.00	\$8294.00
\$7292.00	\$8491.00	\$8294.00
\$10237.00	\$8491.00	\$8294.00
\$6692.00	\$8491.00	\$8294.00
\$6463.00	\$8491.00	\$8294.00
\$5906.00	\$8491.00	\$8294.00
\$8264.00	\$8491.00	\$8294.00
\$9517.00	\$8491.00	\$8294.00
\$8884.00	\$8491.00	\$8294.00
\$6234.00	\$8491.00	\$8294.00
\$6473.00	\$8491.00	\$8294.00
\$8455.00	\$8491.00	\$8294.00
\$5182.00	\$8491.00	\$8294.00
\$5408.00	\$8491.00	\$8294.00
\$5052.00	\$8491.00	\$8294.00

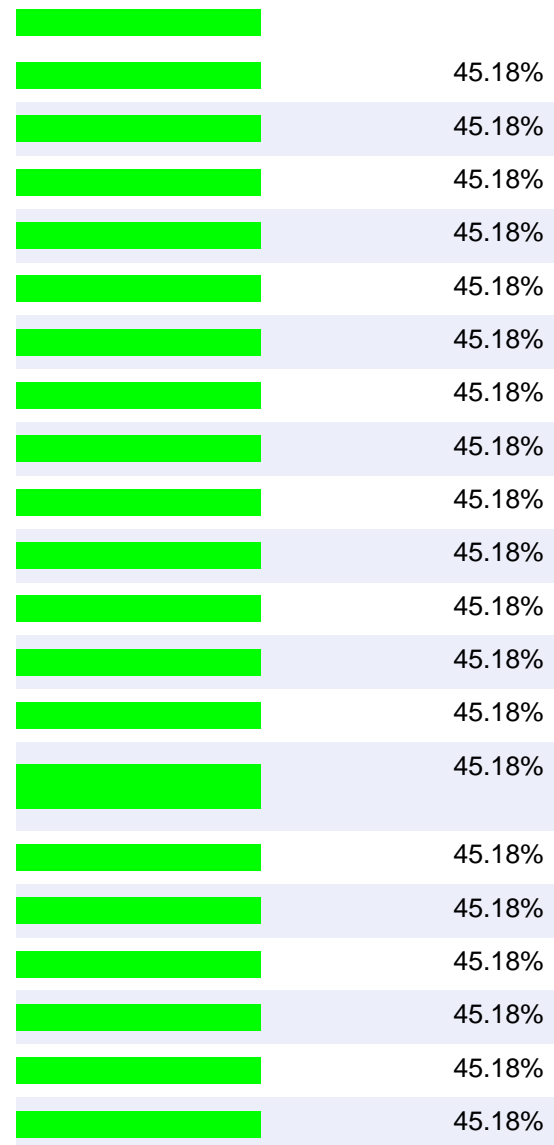
IP-Acute

Based on Spending Breakdown by Claim

	40.98%		42.95%
	42.76%		42.95%
	43.98%		42.95%
	39.58%		42.95%
	46.75%		42.95%
	36.13%		42.95%
	40.37%		42.95%
	47.48%		42.95%
	35.01%		42.95%
	42.41%		42.95%
	53.35%		42.95%
	41.24%		42.95%
	48.07%		42.95%
	44.91%		42.95%
	39.27%		42.95%
	43.25%		42.95%
	41.34%		42.95%
	42.84%		42.95%
	44%		42.95%
	43.02%		42.95%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

LAKE WHITNEY MEDICAL CENTER	450270	TX
WISE REGIONAL HEALTH SYSTEM	450271	TX
CENTRAL TEXAS MEDICAL CENTER	450272	TX
BAYLOR MEDICAL CENTER AT GARLAND	450280	TX
HARRIS COUNTY HOSPITAL DISTRICT	450289	TX
TEXAS HEALTH PRESBYTERIAN HOSPITAL KAUFMAN	450292	TX
FRIO REGIONAL HOSPITAL	450293	TX
CLEVELAND REGIONAL MEDICAL CTR	450296	TX
COLLEGE STATION MEDICAL CENTER	450299	TX
STAMFORD MEMORIAL HOSPITAL	450306	TX
TEXOMA MEDICAL CENTER	450324	TX
OAKBEND MEDICAL CENTER	450330	TX
SAN ANGELO COMMUNITY MEDICAL CENTER	450340	TX
MEMORIAL HERMANN BAPTIST BEAUMONT HOSPITAL	450346	TX
HUNTSVILLE MEMORIAL HOSPITAL	450347	TX
FALLS COMMUNITY HOSPITAL AND CLINIC	450348	TX
TEXAS HEALTH HARRIS METHODIST HOSPITAL STEPHENVILL	450351	TX
HUNT REGIONAL MEDICAL CENTER	450352	TX
METHODIST HOSPITAL,THE	450358	TX
CHILDRESS REGIONAL MEDICAL CENTER	450369	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





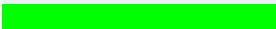
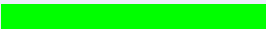
























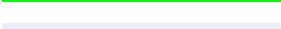
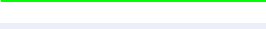
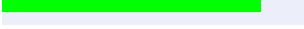
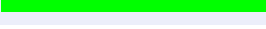




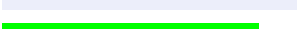
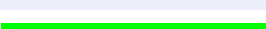
IP-Acute

Based on Spending Breakdown by Claim

\$6087.00	\$8491.00	\$8294.00
\$8230.00	\$8491.00	\$8294.00
\$7518.00	\$8491.00	\$8294.00
\$8342.00	\$8491.00	\$8294.00
\$8369.00	\$8491.00	\$8294.00
\$5992.00	\$8491.00	\$8294.00
\$4746.00	\$8491.00	\$8294.00
\$5112.00	\$8491.00	\$8294.00
\$8587.00	\$8491.00	\$8294.00
\$4605.00	\$8491.00	\$8294.00
\$8564.00	\$8491.00	\$8294.00
\$6781.00	\$8491.00	\$8294.00
\$8451.00	\$8491.00	\$8294.00
\$7444.00	\$8491.00	\$8294.00
\$6840.00	\$8491.00	\$8294.00
\$4960.00	\$8491.00	\$8294.00
\$7354.00	\$8491.00	\$8294.00
\$7000.00	\$8491.00	\$8294.00
\$10738.00	\$8491.00	\$8294.00
\$5394.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42.15%		42.95%
	44.33%		42.95%
	38.89%		42.95%
	39.7%		42.95%
	47.94%		42.95%
	37.78%		42.95%
	39.31%		42.95%
	32.37%		42.95%
	47.16%		42.95%
	43.83%		42.95%
	42.31%		42.95%
	37.6%		42.95%
	43.79%		42.95%
	40.83%		42.95%
	36.75%		42.95%
	39.32%		42.95%
	42.65%		42.95%
	36.48%		42.95%
	48.8%		42.95%
	42.07%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

COLUMBUS COMMUNITY HOSPITAL	450370	TX
BAYLOR MEDICAL CENTER AT WAXAHACHIE	450372	TX
EAST TEXAS MEDICAL CENTER MOUNT VERNON	450373	TX
DALLAS MEDICAL CENTER	450379	TX
METHODIST HOSPITAL	450388	TX
EAST TEXAS MEDICAL CENTER ATHENS	450389	TX
MEMORIAL MEDICAL CENTER LIVINGSTON	450395	TX
BROWNFIELD REGIONAL MEDICAL CENTER	450399	TX
PARKVIEW REGIONAL HOSPITAL	450400	TX
MEDICAL CENTER OF MCKINNEY	450403	TX
EASTLAND MEMORIAL HOSPITAL	450411	TX
TEXAS HEALTH HARRIS METHODIST HOSPITAL AZLE	450419	TX
BAYLOR MEDICAL CENTER AT UPTOWN	450422	TX
SAN JACINTO METHODIST HOSPITAL	450424	TX
ST DAVIDS MEDICAL CENTER	450431	TX
COLORADO FAYETTE MEDICAL CENTER	450438	TX
RIVERSIDE GENERAL HOSPITAL	450446	TX
NAVARRO REGIONAL HOSPITAL	450447	TX
GLEN ROSE MEDICAL CENTER	450451	TX
TYLER COUNTY HOSPITAL	450460	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$7318.00	\$8491.00	\$8294.00
\$7710.00	\$8491.00	\$8294.00
\$4739.00	\$8491.00	\$8294.00
\$8085.00	\$8491.00	\$8294.00
\$9000.00	\$8491.00	\$8294.00
\$5928.00	\$8491.00	\$8294.00
\$6272.00	\$8491.00	\$8294.00
\$5088.00	\$8491.00	\$8294.00
\$5419.00	\$8491.00	\$8294.00
\$7687.00	\$8491.00	\$8294.00
\$5292.00	\$8491.00	\$8294.00
\$6082.00	\$8491.00	\$8294.00
\$13323.00	\$8491.00	\$8294.00
\$7867.00	\$8491.00	\$8294.00
\$9846.00	\$8491.00	\$8294.00
\$6642.00	\$8491.00	\$8294.00
\$5031.00	\$8491.00	\$8294.00
\$5947.00	\$8491.00	\$8294.00
\$5865.00	\$8491.00	\$8294.00
\$4877.00	\$8491.00	\$8294.00

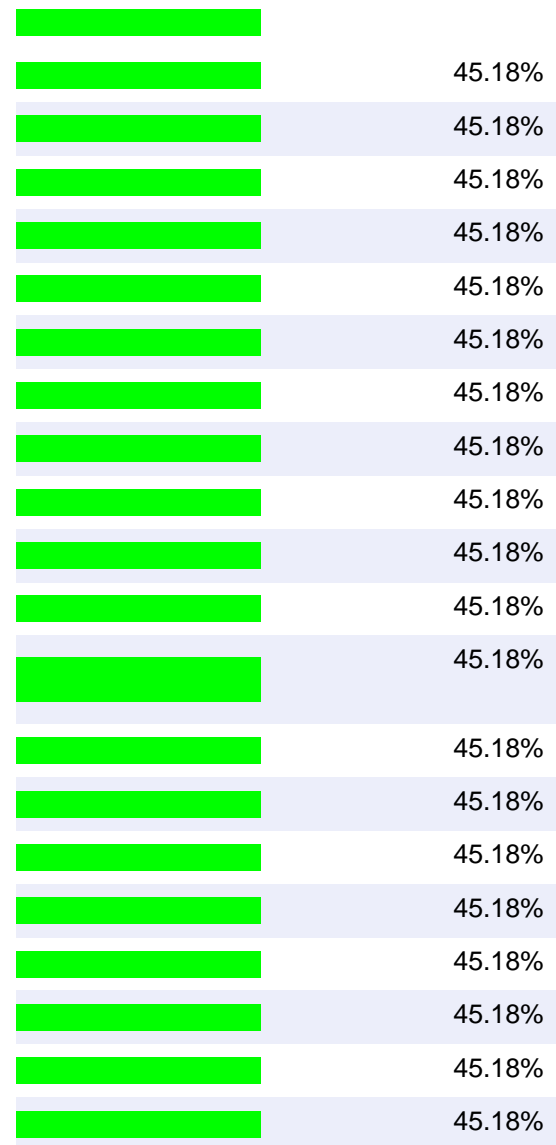
IP-Acute

Based on Spending Breakdown by Claim

	42.36%		42.95%
	43.12%		42.95%
	36.34%		42.95%
	33.59%		42.95%
	44.01%		42.95%
	39.36%		42.95%
	38.39%		42.95%
	34.13%		42.95%
	38.81%		42.95%
	36.2%		42.95%
	39.68%		42.95%
	34.84%		42.95%
	54.6%		42.95%
	39.52%		42.95%
	47.03%		42.95%
	35.7%		42.95%
	40.85%		42.95%
	40.58%		42.95%
	43.42%		42.95%
	38.64%		42.95%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

TEXAS HEALTH PRESBYTERIAN HOSPITAL DALLAS	450462	TX
MATAGORDA REGIONAL MEDICAL CENTER	450465	TX
TEXAS HEALTH PRESBYTERIAN HOSPITAL-WNJ	450469	TX
E T M C HENDERSON	450475	TX
WOODLAND HEIGHTS MEDICAL CENTER	450484	TX
MEDICAL ARTS HOSPITAL	450489	TX
BOWIE MEMORIAL HOSPITAL	450497	TX
STEPHENS MEMORIAL HOSPITAL	450498	TX
MEMORIAL HOSPITAL	450508	TX
THE MEDICAL CENTER OF SOUTHEAST TEXAS	450518	TX
METHODIST RICHARDSON MEDICAL CENTER	450537	TX
COVENANT HOSPITAL PLAINVIEW	450539	TX
ABILENE REGIONAL MEDICAL CENTER	450558	TX
BAYLOR REGIONAL MEDICAL CENTER AT GRAPEVINE	450563	TX
PALO PINTO GENERAL HOSPITAL	450565	TX
SHANNON MEDICAL CENTER	450571	TX
CHRISTUS JASPER MEMORIAL HOSPITAL	450573	TX
EAST TEXAS MEDICAL CENTER CROCKETT	450580	TX
WILBARGER GENERAL HOSPITAL	450584	TX
SEYMOUR HOSPITAL	450586	TX

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





















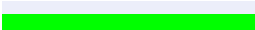
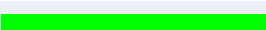
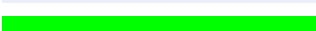
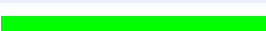
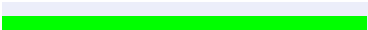
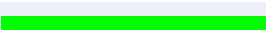














IP-Acute

Based on Spending Breakdown by Claim

\$9003.00	\$8491.00	\$8294.00
\$6237.00	\$8491.00	\$8294.00
\$8521.00	\$8491.00	\$8294.00
\$6404.00	\$8491.00	\$8294.00
\$8042.00	\$8491.00	\$8294.00
\$5018.00	\$8491.00	\$8294.00
\$5750.00	\$8491.00	\$8294.00
\$5047.00	\$8491.00	\$8294.00
\$8073.00	\$8491.00	\$8294.00
\$7175.00	\$8491.00	\$8294.00
\$8320.00	\$8491.00	\$8294.00
\$6244.00	\$8491.00	\$8294.00
\$9474.00	\$8491.00	\$8294.00
\$9027.00	\$8491.00	\$8294.00
\$6734.00	\$8491.00	\$8294.00
\$9185.00	\$8491.00	\$8294.00
\$5382.00	\$8491.00	\$8294.00
\$5348.00	\$8491.00	\$8294.00
\$5776.00	\$8491.00	\$8294.00
\$6373.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	43.03%		42.95%
	35.87%		42.95%
	42.79%		42.95%
	36.21%		42.95%
	46.45%		42.95%
	41.79%		42.95%
	40.07%		42.95%
	40.68%		42.95%
	41%		42.95%
	35.97%		42.95%
	35.95%		42.95%
	44.55%		42.95%
	51.71%		42.95%
	41.57%		42.95%
	39.44%		42.95%
	51.99%		42.95%
	34.63%		42.95%
	39.52%		42.95%
	42.03%		42.95%
	38.77%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

BROWNWOOD REGIONAL MEDICAL CENTER	450587	TX
ANGLETON-DANBURY MEDICAL CENTER	450591	TX
LAKE GRANBURY MEDICAL CENTER	450596	TX
CUERO COMMUNITY HOSPITAL	450597	TX
HILL COUNTRY MEMORIAL HOSPITAL INC	450604	TX
NORTH BAY GENERAL HOSPITAL	450605	TX
MEMORIAL HERMANN MEMORIAL CITY HOSPITAL	450610	TX
PARK PLAZA HOSPITAL	450659	TX
ATLANTA MEMORIAL HOSPITAL	450615	TX
CLEAR LAKE REGIONAL MEDICAL CENTER	450617	TX
DIMMIT REGIONAL HOSPITAL DISTRICT	450620	TX
DENTON REGIONAL MEDICAL CENTER	450634	TX
HOUSTON NORTHWEST MEDICAL CENTER	450638	TX
HARRIS METHODIST H E B HOSPITAL	450639	TX
NOCONA GENERAL HOSPITAL	450641	TX
DOCTORS HOSPITAL OF LAREDO	450643	TX
WEST HOUSTON MEDICAL CENTER	450644	TX
MEDICAL CITY DALLAS HOSPITAL	450647	TX
MEDICAL CENTER OF PLANO	450651	TX
SCENIC MOUNTAIN MEDICAL CENTER	450653	TX
STARR COUNTY MEMORIAL HOSPITAL	450654	TX
NACOGDOCHES MEDICAL CENTER	450656	TX

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient

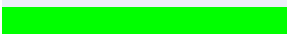
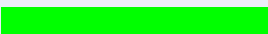


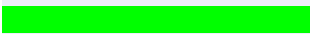
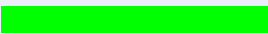














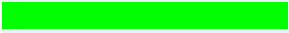
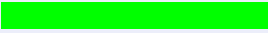






















IP-Acute

Based on Spending Breakdown by Claim

	\$6099.00	\$8491.00	\$8294.00
	\$7274.00	\$8491.00	\$8294.00
	\$7612.00	\$8491.00	\$8294.00
	\$5313.00	\$8491.00	\$8294.00
	\$8712.00	\$8491.00	\$8294.00
	\$5809.00	\$8491.00	\$8294.00
	\$8370.00	\$8491.00	\$8294.00
	\$8195.00	\$8491.00	\$8294.00
	\$4936.00	\$8491.00	\$8294.00
	\$7843.00	\$8491.00	\$8294.00
	\$4562.00	\$8491.00	\$8294.00
	\$7942.00	\$8491.00	\$8294.00
	\$8029.00	\$8491.00	\$8294.00
	\$8133.00	\$8491.00	\$8294.00
	\$4590.00	\$8491.00	\$8294.00
	\$8179.00	\$8491.00	\$8294.00
	\$8278.00	\$8491.00	\$8294.00
	\$10003.00	\$8491.00	\$8294.00
	\$8741.00	\$8491.00	\$8294.00
	\$5874.00	\$8491.00	\$8294.00
	\$5049.00	\$8491.00	\$8294.00
	\$8055.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	40.38%		42.95%
	42.94%		42.95%
	43.74%		42.95%
	36.33%		42.95%
	47.86%		42.95%
	34.46%		42.95%
	39.03%		42.95%
	38.18%		42.95%
	40.1%		42.95%
	39.27%		42.95%
	40.62%		42.95%
	40.48%		42.95%
	39.07%		42.95%
	40.13%		42.95%
	42.8%		42.95%
	45.37%		42.95%
	34.29%		42.95%
	46.41%		42.95%
	37.28%		42.95%
	42.11%		42.95%
	43.99%		42.95%
	43.52%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

EAST TEXAS MEDICAL CENTER - FAIRFIELD	450658	TX
ODESSA REGIONAL HOSPITAL	450661	TX
VALLEY REGIONAL MEDICAL CENTER	450662	TX
SIERRA MEDICAL CENTER	450668	TX
MEDICAL CENTER OF LEWISVILLE	450669	TX
TOMBALL REGIONAL MEDICAL CENTER	450670	TX
PLAZA MEDICAL CENTER OF FORT WORTH	450672	TX
WOMANS HOSPITAL OF TEXAS,THE	450674	TX
MEDICAL CENTER OF ARLINGTON	450675	TX
HUGULEY MEMORIAL MEDICAL CENTER	450677	TX
DOCTORS HOSPITAL	450678	TX
RENAISSANCE HOSPITAL TERRELL	450683	TX
MEMORIAL HERMANN NORTHEAST	450684	TX
UNIVERSITY MEDICAL CENTER	450686	TX
DALLAS REGIONAL MEDICAL CENTER	450688	TX
THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT TYLER	450690	TX
EL CAMPO MEMORIAL HOSPITAL	450694	TX
SOUTHWEST GENERAL HOSPITAL	450697	TX
LAMB HEALTHCARE CENTER	450698	TX
LONGVIEW REGIONAL MEDICAL CENTER	450702	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$5499.00	\$8491.00	\$8294.00
\$9014.00	\$8491.00	\$8294.00
\$8131.00	\$8491.00	\$8294.00
\$8565.00	\$8491.00	\$8294.00
\$7311.00	\$8491.00	\$8294.00
\$7600.00	\$8491.00	\$8294.00
\$10296.00	\$8491.00	\$8294.00
\$5930.00	\$8491.00	\$8294.00
\$7777.00	\$8491.00	\$8294.00
\$7842.00	\$8491.00	\$8294.00
\$7480.00	\$8491.00	\$8294.00
\$6089.00	\$8491.00	\$8294.00
\$7720.00	\$8491.00	\$8294.00
\$8773.00	\$8491.00	\$8294.00
\$7552.00	\$8491.00	\$8294.00
\$8255.00	\$8491.00	\$8294.00
\$5826.00	\$8491.00	\$8294.00
\$8004.00	\$8491.00	\$8294.00
\$4336.00	\$8491.00	\$8294.00
\$9703.00	\$8491.00	\$8294.00

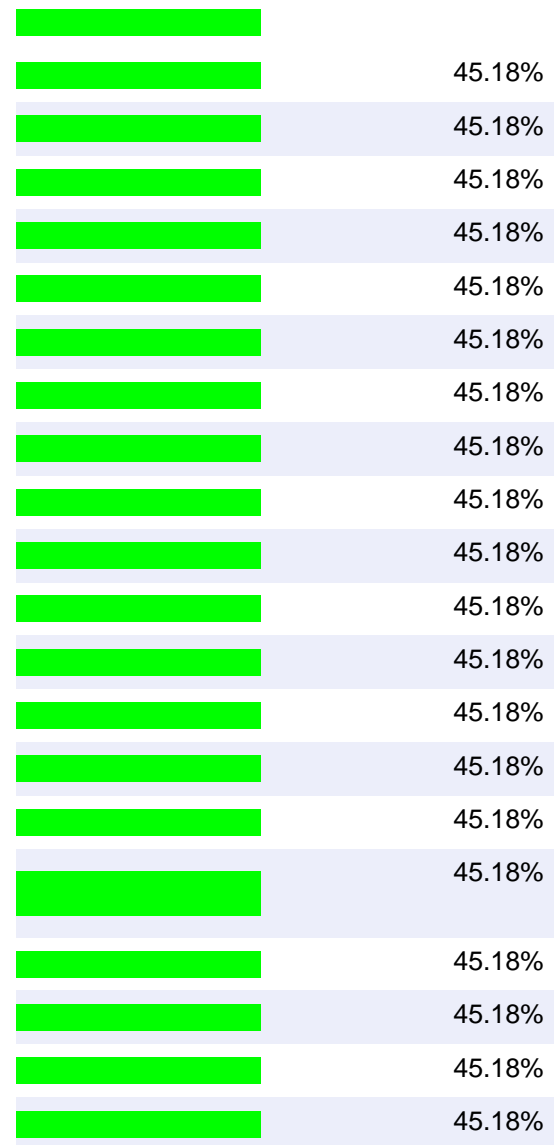
IP-Acute

Based on Spending Breakdown by Claim

	35.2%		42.95%
	47.63%		42.95%
	41.03%		42.95%
	44.15%		42.95%
	42.06%		42.95%
	37.64%		42.95%
	46.48%		42.95%
	65.55%		42.95%
	38.96%		42.95%
	39.22%		42.95%
	36.51%		42.95%
	48.52%		42.95%
	37.64%		42.95%
	45.31%		42.95%
	39.13%		42.95%
	48.85%		42.95%
	34.55%		42.95%
	42.05%		42.95%
	35.55%		42.95%
	47.19%		42.95%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

CHRISTUS ST JOHN HOSPITAL	450709	TX
RIO GRANDE REGIONAL HOSPITAL	450711	TX
ST DAVID'S SOUTH AUSTIN MEDICAL CENTER	450713	TX
CYPRESS FAIRBANKS MEDICAL CENTER	450716	TX
ROUND ROCK MEDICAL CENTER	450718	TX
METHODIST CHARLTON MEDICAL CENTER	450723	TX
BAYLOR MEDICAL CENTER AT CARROLLTON	450730	TX
LAKE POINTE MEDICAL CENTER	450742	TX
TEXAS HEALTH PRESBYTERIAN HOSPITAL DENTON	450743	TX
KNOX COUNTY HOSPITAL	450746	TX
PALESTINE REGIONAL MEDICAL CENTER	450747	TX
EAST TEXAS MEDICAL CENTER TRINITY	450749	TX
HAMILTON GENERAL HOSPITAL	450754	TX
COVENANT HOSPITAL LEVELLAND	450755	TX
U.T. SOUTHWESTERN UNIVERSITY HOSPITAL - ZALE LIPSHY	450766	TX
CENTRAL TEXAS HOSPITAL	450770	TX
PRESBYTERIAN HOSPITAL OF PLANO	450771	TX
T O P S SURGICAL SPECIALTY HOSPITAL	450774	TX
KINGWOOD MEDICAL CENTER	450775	TX
TEXAS HEALTH HARRIS METHODIST HOSPITAL SOUTHWEST F	450779	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





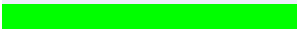
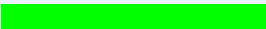






























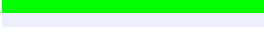
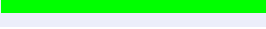


IP-Acute

Based on Spending Breakdown by Claim

\$7471.00	\$8491.00	\$8294.00
\$8267.00	\$8491.00	\$8294.00
\$8347.00	\$8491.00	\$8294.00
\$7132.00	\$8491.00	\$8294.00
\$8640.00	\$8491.00	\$8294.00
\$8017.00	\$8491.00	\$8294.00
\$7932.00	\$8491.00	\$8294.00
\$6493.00	\$8491.00	\$8294.00
\$7966.00	\$8491.00	\$8294.00
\$5698.00	\$8491.00	\$8294.00
\$5902.00	\$8491.00	\$8294.00
\$5219.00	\$8491.00	\$8294.00
\$5200.00	\$8491.00	\$8294.00
\$5600.00	\$8491.00	\$8294.00
\$9716.00	\$8491.00	\$8294.00
\$6858.00	\$8491.00	\$8294.00
\$8592.00	\$8491.00	\$8294.00
\$10755.00	\$8491.00	\$8294.00
\$8131.00	\$8491.00	\$8294.00
\$7668.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	39.43%		42.95%
	41.16%		42.95%
	41.86%		42.95%
	34.75%		42.95%
	43.11%		42.95%
	36.09%		42.95%
	36.74%		42.95%
	37.01%		42.95%
	40.61%		42.95%
	38.37%		42.95%
	38.94%		42.95%
	27.57%		42.95%
	41.1%		42.95%
	43.9%		42.95%
	54.83%		42.95%
	53.99%		42.95%
	43.22%		42.95%
	55.77%		42.95%
	37.5%		42.95%
	42.17%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

SOUTHWEST F

METHODIST AMBULATORY SURGERY HOSPITAL N.W.	450780	TX
THE CORPUS CHRISTI MEDICAL CENTER	450788	TX
ST. ANTHONY'S HOSPITAL	450795	TX
CHRISTUS ST MICHAEL HEALTH SYSTEM	450801	TX
DOCTORS HOSPITAL TIDWELL	450803	TX
TEXAS ORTHOPEDIC HOSPITAL	450804	TX
NORTHWEST HILLS SURGICAL HOSPITAL	450808	TX
NORTH AUSTIN MEDICAL CENTER	450809	TX
COMMUNITY GENERAL HOSPITAL	450813	TX
METHODIST SUGAR LAND HOSPITAL	450820	TX
LAS COLINAS MEDICAL CENTER	450822	TX
CORNERSTONE REGIONAL HOSPITAL	450825	TX
KELL WEST REGIONAL HOSPITAL	450827	TX
CHRISTUS SPOHN HOSPITAL ALICE	450828	TX
CHRISTUS ST. CATHERINE HEALTH AND WELLNESS CENTER	450832	TX
ENNIS REGIONAL MEDICAL CENTER	450833	TX
THE PHYSICIANS CENTRE	450834	TX
SHELBY REGIONAL MEDICAL CENTER	450839	TX
TEXAS HEALTH PRESBYTERIAN HOSPITAL ALLEN	450840	TX

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

	\$11501.00	\$8491.00	\$8294.00
	\$8460.00	\$8491.00	\$8294.00
	\$9690.00	\$8491.00	\$8294.00
	\$8717.00	\$8491.00	\$8294.00
	\$7341.00	\$8491.00	\$8294.00
	\$12517.00	\$8491.00	\$8294.00
	\$11577.00	\$8491.00	\$8294.00
	\$8770.00	\$8491.00	\$8294.00
	\$6126.00	\$8491.00	\$8294.00
	\$9253.00	\$8491.00	\$8294.00
	\$8530.00	\$8491.00	\$8294.00
	\$11116.00	\$8491.00	\$8294.00
	\$8527.00	\$8491.00	\$8294.00
	\$6834.00	\$8491.00	\$8294.00
	\$7242.00	\$8491.00	\$8294.00
	\$5712.00	\$8491.00	\$8294.00
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	\$6775.00	\$8491.00	\$8294.00

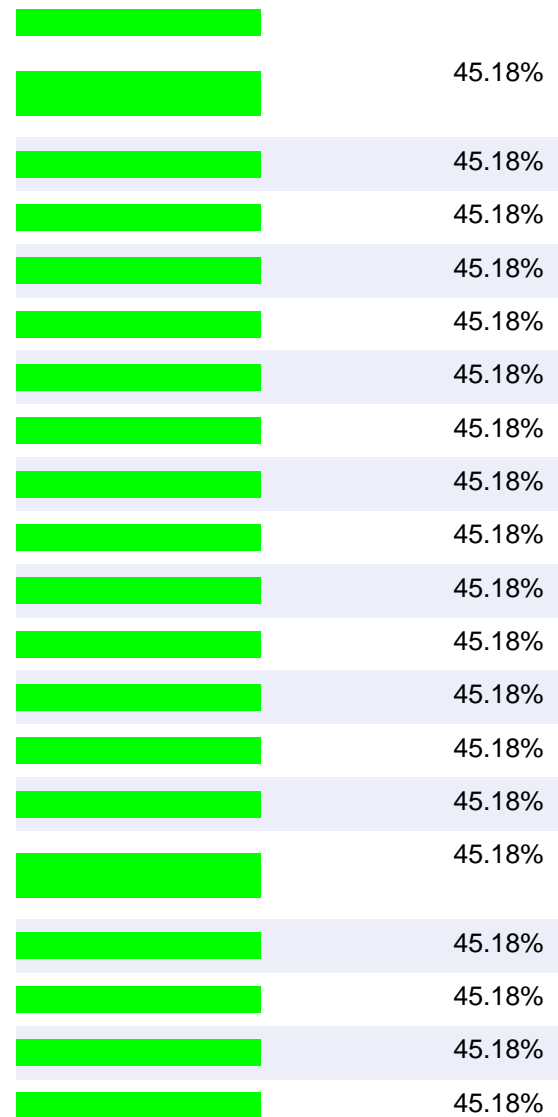
IP-Acute

Based on Spending Breakdown by Claim

	59.54%		42.95%
	46.71%		42.95%
	41.42%		42.95%
	42.72%		42.95%
	34.9%		42.95%
	60.49%		42.95%
	63.86%		42.95%
	43.92%		42.95%
	61.49%		42.95%
	40.25%		42.95%
	46.65%		42.95%
	46.97%		42.95%
	41.36%		42.95%
	39.04%		42.95%
	40.71%		42.95%
	32.07%		42.95%
	76.2%		42.95%
	37.74%		42.95%
	35.26%		42.95%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

BROWNSVILLE SURGICAL HOSPITAL	450841	TX
METHODIST WILLOWBROOK HOSPITAL	450844	TX
EL PASO SPECIALTY HOSPITAL	450845	TX
MEMORIAL HERMANN KATY HOSPITAL	450847	TX
MEMORIAL HERMANN SUGAR LAND HOSPITAL	450848	TX
BAYLOR HEART AND VASCULAR HOSPITAL	450851	TX
FRISCO MEDICAL CENTER	450853	TX
HARLINGEN MEDICAL CENTER	450855	TX
THE SPINE HOSPITAL OF SOUTH TEXAS	450856	TX
SURGICAL SPECIALTY HOSPITAL OF SUGAR LAND	450860	TX
ST LUKE'S THE WOODLANDS HOSPITAL	450862	TX
TEXAS SPINE AND JOINT HOSPITAL	450864	TX
SETON SOUTHWEST HEALTHCARE CENTER	450865	TX
SETON NORTHWEST HOSPITAL	450867	TX
DOCTORS HOSPITAL AT RENAISSANCE	450869	TX
AUSTIN SURGICAL HOSPITAL	450871	TX
U.S.M.D. HOSPITAL AT ARLINGTON	450872	TX
PHYSICIANS SURGICAL HOSPITAL AT QUAIL CREEK	450875	TX
LUBBOCK HEART HOSPITAL LP	450876	TX
EAST EL PASO PHYSICIANS MEDICAL CENTER	450877	TX
BAYLOR SURGICAL HOSPITAL AT FORT WORTH	450880	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





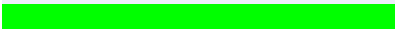
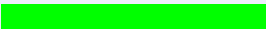
















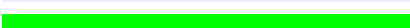
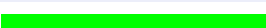
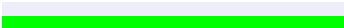
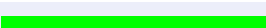
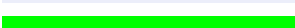
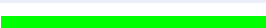
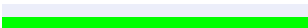
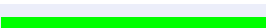
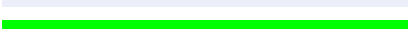
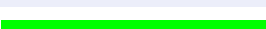
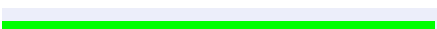
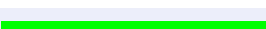




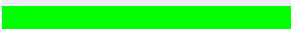
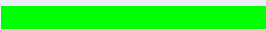


IP-Acute

Based on Spending Breakdown by Claim

\$10818.00	\$8491.00	\$8294.00
\$7458.00	\$8491.00	\$8294.00
\$12977.00	\$8491.00	\$8294.00
\$7724.00	\$8491.00	\$8294.00
\$8556.00	\$8491.00	\$8294.00
\$12074.00	\$8491.00	\$8294.00
\$12442.00	\$8491.00	\$8294.00
\$10009.00	\$8491.00	\$8294.00
\$16247.00	\$8491.00	\$8294.00
\$12400.00	\$8491.00	\$8294.00
\$9173.00	\$8491.00	\$8294.00
\$14671.00	\$8491.00	\$8294.00
\$7744.00	\$8491.00	\$8294.00
\$6697.00	\$8491.00	\$8294.00
\$9303.00	\$8491.00	\$8294.00
\$11158.00	\$8491.00	\$8294.00
\$7551.00	\$8491.00	\$8294.00
\$11791.00	\$8491.00	\$8294.00
\$9559.00	\$8491.00	\$8294.00
\$7554.00	\$8491.00	\$8294.00
\$15062.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	55.84%		42.95%
	37.83%		42.95%
	56.28%		42.95%
	38.42%		42.95%
	39.6%		42.95%
	57.84%		42.95%
	54.77%		42.95%
	46.69%		42.95%
	61.67%		42.95%
	58.72%		42.95%
	39.35%		42.95%
	58.1%		42.95%
	48.73%		42.95%
	41.9%		42.95%
	43.37%		42.95%
	57.62%		42.95%
	61.39%		42.95%
	59.06%		42.95%
	57.01%		42.95%
	41.25%		42.95%
	59.14%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

EAST TEXAS MEDICAL CENTER - GILMER	450884	TX
CENTENNIAL MEDICAL CENTER	450885	TX
TEXAS HEALTH HARRIS METHODIST HOSPITAL SOUTHLAKE	450888	TX
BAYLOR REGIONAL MEDICAL CENTER AT PLANO	450890	TX
TEXAS HEALTH CENTER FOR DIAGNOSTICS & SURGERY	450891	TX
NORTH TEXAS HOSPITAL	450893	TX
PINE CREEK MEDICAL CENTER	450894	TX
UTAH VALLEY REGIONAL MEDICAL CENTER	460001	UT
SALT LAKE REGIONAL MEDICAL CENTER	460003	UT
MCKAY DEE HOSPITAL CENTER	460004	UT
OGDEN REGIONAL MEDICAL CENTER	460005	UT
LDS HOSPITAL	460006	UT
VALLEY VIEW MEDICAL CENTER	460007	UT
UNIVERSITY HEALTH CARE/UNIV HOSPITALS AND CLINICS	460009	UT
INTERMOUNTAIN MEDICAL CENTER	460010	UT
CASTLEVIEW HOSPITAL	460011	UT
MOUNTAIN WEST MEDICAL CENTER	460014	UT
MOUNTAIN VIEW HOSPITAL	460013	UT
LOGAN REGIONAL HOSPITAL	460015	UT
BRIGHAM CITY COMMUNITY HOSPITAL	460017	UT

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient




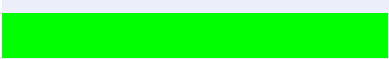
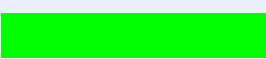




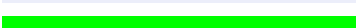
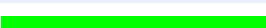
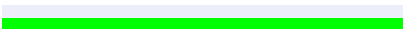
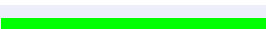
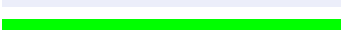
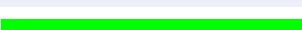




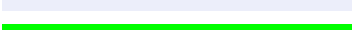
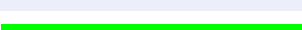
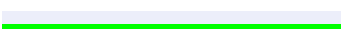
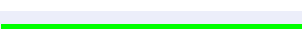
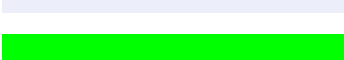
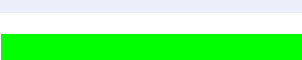


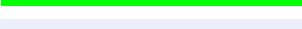
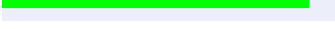
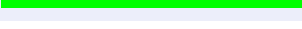


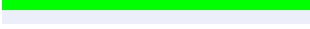
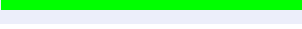
IP-Acute

Based on Spending Breakdown by Claim

\$5945.00	\$8491.00	\$8294.00
\$8507.00	\$8491.00	\$8294.00
\$13536.00	\$8491.00	\$8294.00
\$9600.00	\$8491.00	\$8294.00
\$13465.00	\$8491.00	\$8294.00
\$10522.00	\$8491.00	\$8294.00
\$14136.00	\$8491.00	\$8294.00
\$10255.00	\$9391.00	\$8294.00
\$10823.00	\$9391.00	\$8294.00
\$9447.00	\$9391.00	\$8294.00
\$8893.00	\$9391.00	\$8294.00
\$9750.00	\$9391.00	\$8294.00
\$7639.00	\$9391.00	\$8294.00
\$11086.00	\$9391.00	\$8294.00
\$10348.00	\$9391.00	\$8294.00
\$7720.00	\$9391.00	\$8294.00
\$6077.00	\$9391.00	\$8294.00
\$7731.00	\$9391.00	\$8294.00
\$8674.00	\$9391.00	\$8294.00
\$7485.00	\$9391.00	\$8294.00

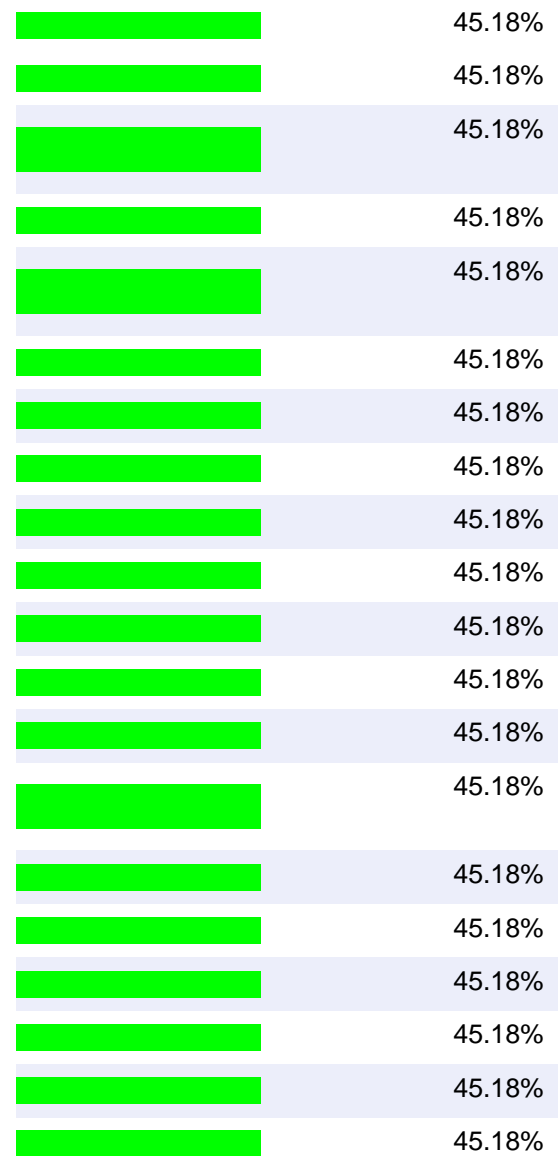
IP-Acute

Based on Spending Breakdown by Claim

	37.29%		42.95%
	36.89%		42.95%
	54.81%		42.95%
	45.1%		42.95%
	63.87%		42.95%
	50.47%		42.95%
	57.07%		42.95%
	48.22%		48.31%
	46.2%		48.31%
	49.53%		48.31%
	46.16%		48.31%
	49.77%		48.31%
	48.3%		48.31%
	48.64%		48.31%
	49.45%		48.31%
	49.14%		48.31%
	43.57%		48.31%
	47.21%		48.31%
	49.33%		48.31%
	43.75%		48.31%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

UINTAH BASIN MEDICAL CENTER	460019	UT
DIXIE REGIONAL MEDICAL CENTER	460021	UT
AMERICAN FORK HOSPITAL	460023	UT
SEVIER VALLEY MEDICAL CENTER	460026	UT
ASHLEY REGIONAL MEDICAL CENTER	460030	UT
GARFIELD MEMORIAL HOSPITAL	460033	UT
BEAVER VALLEY HOSPITAL	460035	UT
BEAR RIVER VALLEY HOSPITAL	460039	UT
DAVIS HOSPITAL AND MEDICAL CENTER	460041	UT
LAKEVIEW HOSPITAL	460042	UT
ALTA VIEW HOSPITAL	460044	UT
ST MARKS HOSPITAL	460047	UT
THE ORTHOPEDIC SPECIALTY HOSPITAL	460049	UT
JORDAN VALLEY MEDICAL CENTER	460051	UT
TIMPANOGOS REGIONAL HOSPITAL	460052	UT
CACHE VALLEY HOSPITAL	460054	UT
PARK CITY MEDICAL CENTER	460057	UT
RIVERTON HOSPITAL	460058	UT
CENTRAL VERMONT MEDICAL CENTER	470001	VT
FLETCHER ALLEN HEALTH CARE	470003	VT
RUTLAND REGIONAL MEDICAL CENTER	470005	VT

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$6820.00	\$9391.00	\$8294.00
\$9768.00	\$9391.00	\$8294.00
\$7865.00	\$9391.00	\$8294.00
\$5209.00	\$9391.00	\$8294.00
\$5598.00	\$9391.00	\$8294.00
\$5229.00	\$9391.00	\$8294.00
\$5551.00	\$9391.00	\$8294.00
\$5894.00	\$9391.00	\$8294.00
\$8176.00	\$9391.00	\$8294.00
\$8875.00	\$9391.00	\$8294.00
\$7687.00	\$9391.00	\$8294.00
\$9452.00	\$9391.00	\$8294.00
\$12232.00	\$9391.00	\$8294.00
\$8084.00	\$9391.00	\$8294.00
\$8865.00	\$9391.00	\$8294.00
\$9505.00	\$9391.00	\$8294.00
\$9882.00	\$9391.00	\$8294.00
\$6276.00	\$9391.00	\$8294.00
\$6831.00	\$8296.00	\$8294.00
\$9422.00	\$8296.00	\$8294.00
\$7173.00	\$8296.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	50.49%		48.31%
	52.4%		48.31%
	46.36%		48.31%
	33.48%		48.31%
	50.09%		48.31%
	42.99%		48.31%
	57.69%		48.31%
	46.49%		48.31%
	41.53%		48.31%
	46.71%		48.31%
	45.53%		48.31%
	46.71%		48.31%
	54.14%		48.31%
	42.73%		48.31%
	45.96%		48.31%
	52.86%		48.31%
	50.62%		48.31%
	46.72%		48.31%
	42.5%		45.16%
	50.59%		45.16%
	44.23%		45.16%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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IP-Acute

Based on Spending Breakdown by Claim

BRATTLEBORO MEMORIAL HOSPITAL	470011	VT
SOUTHWESTERN VERMONT MEDICAL CENTER	470012	VT
NORTHWESTERN MEDICAL CENTER INC	470024	VT
NORTON COMMUNITY HOSPITAL	490001	VA
CENTRA	490021	VA
RUSSELL COUNTY MEDICAL CENTER	490002	VA
ROCKINGHAM MEMORIAL HOSPITAL	490004	VA
WINCHESTER MEDICAL CENTER	490005	VA
SENTARA NORFOLK GENERAL HOSPITAL	490007	VA
UNIVERSITY OF VIRGINIA MEDICAL CENTER	490009	VA
BON SECOURS - DEPAUL MEDICAL CENTER	490011	VA
LEE REGIONAL MEDICAL CENTER	490012	VA
HALIFAX REGIONAL HOSPITAL	490013	VA
BON SECOURS - MARYVIEW MEDICAL CENTER	490017	VA
AUGUSTA HEALTH	490018	VA
CULPEPER REGIONAL HOSPITAL	490019	VA
JOHN RANDOLPH MEDICAL CENTER	490020	VA
MARY WASHINGTON HOSPITAL	490022	VA
FAUQUIER HOSPITAL	490023	VA
CARILION MEDICAL CENTER	490024	VA
MOUNTAIN VIEW REGIONAL MEDICAL CENTER	490027	VA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$7156.00	\$8296.00	\$8294.00
\$7140.00	\$8296.00	\$8294.00
\$7600.00	\$8296.00	\$8294.00
\$5926.00	\$8214.00	\$8294.00
\$7789.00	\$8214.00	\$8294.00
\$5065.00	\$8214.00	\$8294.00
\$7695.00	\$8214.00	\$8294.00
\$8157.00	\$8214.00	\$8294.00
\$9807.00	\$8214.00	\$8294.00
\$11001.00	\$8214.00	\$8294.00
\$8824.00	\$8214.00	\$8294.00
\$6107.00	\$8214.00	\$8294.00
\$8459.00	\$8214.00	\$8294.00
\$8095.00	\$8214.00	\$8294.00
\$8152.00	\$8214.00	\$8294.00
\$7935.00	\$8214.00	\$8294.00
\$6507.00	\$8214.00	\$8294.00
\$8593.00	\$8214.00	\$8294.00
\$7231.00	\$8214.00	\$8294.00
\$9254.00	\$8214.00	\$8294.00
\$6632.00	\$8214.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	37.17%		45.16%
	46.43%		45.16%
	47.15%		45.16%
	44.36%		46.46%
	45.31%		46.46%
	42.58%		46.46%
	48.58%		46.46%
	50.63%		46.46%
	49.24%		46.46%
	50.86%		46.46%
	43.98%		46.46%
	44.34%		46.46%
	48.56%		46.46%
	45.79%		46.46%
	48.32%		46.46%
	44.3%		46.46%
	39.69%		46.46%
	45.43%		46.46%
	41.82%		46.46%
	49.29%		46.46%
	45.55%		46.46%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

VCU HEALTH SYSTEM	490032	VA
WARREN MEMORIAL HOSPITAL	490033	VA
RIVERSIDE SHORE MEMORIAL HOSPITAL	490037	VA
SMYTH COUNTY COMMUNITY HOSPITAL	490038	VA
INOVA ALEXANDRIA HOSPITAL	490040	VA
BON SECOURS - MARY IMMACULATE HOSPITAL	490041	VA
CARILION NEW RIVER VALLEY MEDICAL CENTER	490042	VA
INOVA LOUDOUN HOSPITAL	490043	VA
SENTARA OBICI HOSPITAL	490044	VA
PRINCE WILLIAM HOSPITAL	490045	VA
SENTARA LEIGH HOSPITAL	490046	VA
LEWISGALE MEDICAL CENTER	490048	VA
VIRGINIA HOSPITAL CENTER	490050	VA
RIVERSIDE REGIONAL MEDICAL CENTER	490052	VA
JOHNSTON MEMORIAL HOSPITAL	490053	VA
SENTARA VIRGINIA BEACH GENERAL HOSPITAL	490057	VA
BON SECOURS - ST MARYS HOSPITAL	490059	VA
CLINCH VALLEY MEDICAL CENTER	490060	VA
INOVA FAIRFAX HOSPITAL	490063	VA
SENTARA WILLIAMSBURG REGIONAL MEDICAL CENTER	490066	VA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$10981.00	\$8214.00	\$8294.00
\$5887.00	\$8214.00	\$8294.00
\$6506.00	\$8214.00	\$8294.00
\$6934.00	\$8214.00	\$8294.00
\$8043.00	\$8214.00	\$8294.00
\$9933.00	\$8214.00	\$8294.00
\$7337.00	\$8214.00	\$8294.00
\$6565.00	\$8214.00	\$8294.00
\$7327.00	\$8214.00	\$8294.00
\$7359.00	\$8214.00	\$8294.00
\$7979.00	\$8214.00	\$8294.00
\$8161.00	\$8214.00	\$8294.00
\$7937.00	\$8214.00	\$8294.00
\$8458.00	\$8214.00	\$8294.00
\$6406.00	\$8214.00	\$8294.00
\$8575.00	\$8214.00	\$8294.00
\$9458.00	\$8214.00	\$8294.00
\$5678.00	\$8214.00	\$8294.00
\$10030.00	\$8214.00	\$8294.00
\$7079.00	\$8214.00	\$8294.00

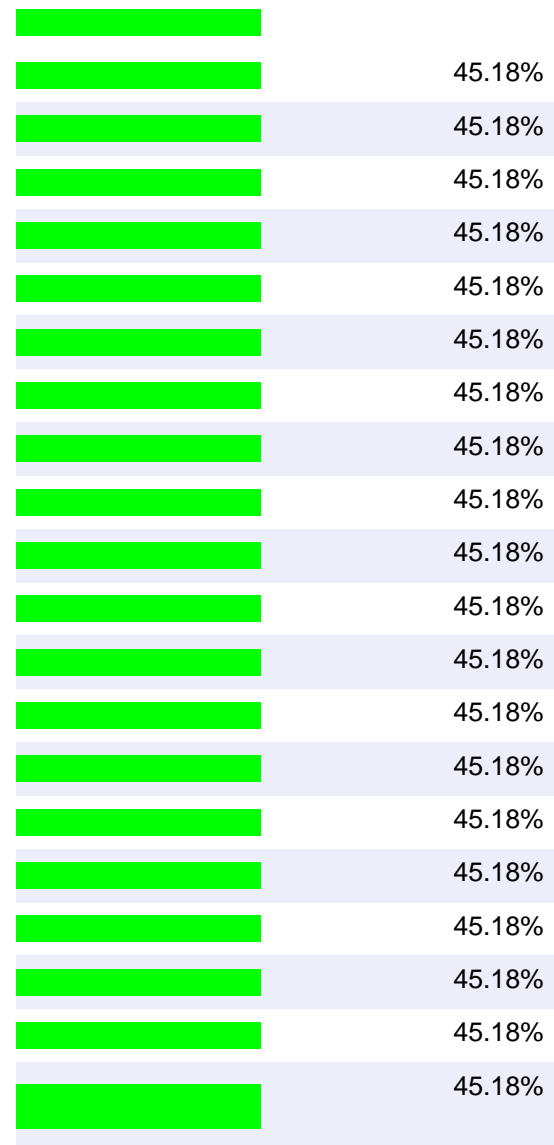
IP-Acute

Based on Spending Breakdown by Claim

	51.85%		46.46%
	49.28%		46.46%
	44.09%		46.46%
	51.84%		46.46%
	45.12%		46.46%
	50.71%		46.46%
	44.41%		46.46%
	40.5%		46.46%
	42.99%		46.46%
	42.9%		46.46%
	45.55%		46.46%
	44.19%		46.46%
	45.27%		46.46%
	46.01%		46.46%
	45.01%		46.46%
	46.84%		46.46%
	47.93%		46.46%
	45%		46.46%
	47.13%		46.46%
	43.89%		46.46%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

SOUTHSIDE REGIONAL MEDICAL CENTER	490067	VA
BON SECOURS - MEMORIAL REGIONAL MEDICAL	490069	VA
DANVILLE REGIONAL MEDICAL CENTER	490075	VA
MARTHA JEFFERSON HOSPITAL	490077	VA
MEMORIAL HOSPITAL OF MARTINSVILLE & HENRY COUNTY	490079	VA
RIVERSIDE TAPPAHANNOCK HOSPITAL	490084	VA
BEDFORD MEMORIAL HOSPITAL	490088	VA
CARILION FRANKLIN MEMORIAL HOSPITAL	490089	VA
CENTRA SOUTHSIDE COMMUNITY HOSPITAL, INC	490090	VA
SOUTHAMPTON MEMORIAL HOSPITAL	490092	VA
SENTARA CAREPLEX HOSPITAL	490093	VA
BON SECOURS - RICHMOND COMMUNITY HOSPITAL	490094	VA
SOUTHERN VIRGINIA REGIONAL MEDICAL CENTER	490097	VA
COMMUNITY MEMORIAL HEALTHCENTER	490098	VA
INOVA FAIR OAKS HOSPITAL	490101	VA
RESTON HOSPITAL CENTER	490107	VA
EASTERN STATE HOSPITAL	490109	VA
LEWISGALE HOSPITAL - MONTGOMERY	490110	VA
WYTHE COUNTY COMMUNITY HOSPITAL	490111	VA
CJW MEDICAL CENTER	490112	VA

IP-Acute

Based on Spending Breakdown by Claim

[illegible]




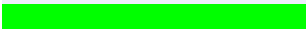
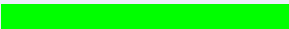










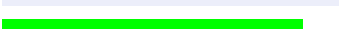
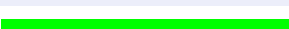
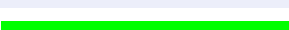
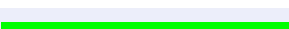
IP-Acute

Based on Spending Breakdown by Claim

\$6983.00	\$8214.00	\$8294.00
\$9150.00	\$8214.00	\$8294.00
\$7207.00	\$8214.00	\$8294.00
\$7823.00	\$8214.00	\$8294.00
\$6691.00	\$8214.00	\$8294.00
\$5889.00	\$8214.00	\$8294.00
\$5801.00	\$8214.00	\$8294.00
\$5882.00	\$8214.00	\$8294.00
\$5885.00	\$8214.00	\$8294.00
\$5955.00	\$8214.00	\$8294.00
\$8510.00	\$8214.00	\$8294.00
\$5724.00	\$8214.00	\$8294.00
\$5696.00	\$8214.00	\$8294.00
\$6363.00	\$8214.00	\$8294.00
\$8290.00	\$8214.00	\$8294.00
\$9702.00	\$8214.00	\$8294.00
\$5806.00	\$8214.00	\$8294.00
\$8033.00	\$8214.00	\$8294.00
\$6995.00	\$8214.00	\$8294.00
\$9111.00	\$8214.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	41.91%		46.46%
	47.87%		46.46%
	43.07%		46.46%
	48.08%		46.46%
	43.26%		46.46%
	43.12%		46.46%
	42.71%		46.46%
	44.49%		46.46%
	40.19%		46.46%
	47.31%		46.46%
	45.09%		46.46%
	44.41%		46.46%
	38.78%		46.46%
	42.64%		46.46%
	48.46%		46.46%
	48.06%		46.46%
	53.29%		46.46%
	44.61%		46.46%
	45.12%		46.46%
	47.05%		46.46%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

SENTARA NORTHERN VIRGINIA MEDICAL CENTER	490113	VA
WELLMONT LONESOME PINE HOSPITAL	490114	VA
TWIN COUNTY REGIONAL HOSPITAL	490115	VA
LEWISGALE HOSPITAL - PULASKI	490116	VA
CARILION TAZEWELL COMMUNITY HOSPITAL	490117	VA
HENRICO DOCTORS' HOSPITAL	490118	VA
SENTARA PRINCESS ANNE HOSPITAL	490119	VA
CHESAPEAKE REGIONAL MEDICAL CENTER	490120	VA
INNOVA MOUNT VERNON HOSPITAL	490122	VA
RAPPAHANNOCK GENERAL HOSPITAL	490123	VA
LEWISGALE HOSPITAL - ALLEGHANY	490126	VA
BUCHANAN GENERAL HOSPITAL	490127	VA
RIVERSIDE WALTER REED HOSPITAL	490130	VA
BON SECOURS - ST FRANCIS MEDICAL CENTER	490136	VA
STAFFORD HOSPITAL	490140	VA
SPOTSYLVANIA REGIONAL MEDICAL CENTER	490141	VA
NORTHWEST HOSPITAL & MEDICAL CENTER	500001	WA
PROVIDENCE ST MARY MEDICAL CENTER	500002	WA
SKAGIT VALLEY HOSPITAL	500003	WA
VIRGINIA MASON MEDICAL CENTER	500005	WA
ISLAND HOSPITAL	500007	WA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$6820.00	\$8214.00	\$8294.00
\$5491.00	\$8214.00	\$8294.00
\$6210.00	\$8214.00	\$8294.00
\$6227.00	\$8214.00	\$8294.00
\$4967.00	\$8214.00	\$8294.00
\$9357.00	\$8214.00	\$8294.00
\$7755.00	\$8214.00	\$8294.00
\$8091.00	\$8214.00	\$8294.00
\$8690.00	\$8214.00	\$8294.00
\$6490.00	\$8214.00	\$8294.00
\$6299.00	\$8214.00	\$8294.00
\$5843.00	\$8214.00	\$8294.00
\$6600.00	\$8214.00	\$8294.00
\$9215.00	\$8214.00	\$8294.00
\$6850.00	\$8214.00	\$8294.00
\$7486.00	\$8214.00	\$8294.00
\$9146.00	\$8817.00	\$8294.00
\$9877.00	\$8817.00	\$8294.00
\$7745.00	\$8817.00	\$8294.00
\$10277.00	\$8817.00	\$8294.00
\$7592.00	\$8817.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	42%		46.46%
	42.64%		46.46%
	40.57%		46.46%
	40%		46.46%
	34.71%		46.46%
	48.53%		46.46%
	47.2%		46.46%
	44.29%		46.46%
	47.31%		46.46%
	48.86%		46.46%
	42.22%		46.46%
	50.3%		46.46%
	45.55%		46.46%
	49.85%		46.46%
	41.82%		46.46%
	46.34%		46.46%
	48.39%		50.3%
	52.76%		50.3%
	45.45%		50.3%
	51.17%		50.3%
	45.74%		50.3%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
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	45.18%

IP-Acute

Based on Spending Breakdown by Claim

UNIVERSITY OF WASHINGTON MEDICAL CTR	500008	WA
HIGHLINE MEDICAL CENTER	500011	WA
YAKIMA HMA, INC. D/B/A YAKIMA REGIONAL MEDICAL AND CARDIAC CENTER	500012	WA
PROVIDENCE REGIONAL MEDICAL CENTER EVERETT	500014	WA
AUBURN REGIONAL MEDICAL CENTER	500015	WA
CENTRAL WASHINGTON HOSPITAL	500016	WA
PROVIDENCE CENTRALIA HOSPITAL	500019	WA
ST CLARE HOSPITAL	500021	WA
PROVIDENCE ST PETER HOSPITAL	500024	WA
SWEDISH MEDICAL CENTER - CHERRY HILL	500025	WA
SWEDISH EDMONDS HOSPITAL	500026	WA
SWEDISH MEDICAL CENTER - FIRST HILL/BALLARD	500027	WA
ST JOSEPH HOSPITAL/PEACEHEALTH	500030	WA
GRAYS HARBOR COMMUNITY HOSPITAL	500031	WA
SAMARITAN HOSPITAL	500033	WA
YAKIMA VALLEY MEMORIAL HOSPITAL	500036	WA
TOPPENISH COMMUNITY HOSPITAL	500037	WA
HARRISON MEDICAL CENTER	500039	WA
PEACEHEALTH ST JOHN MEDICAL CENTER	500041	WA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$11926.00	\$8817.00	\$8294.00
\$7709.00	\$8817.00	\$8294.00
\$8992.00	\$8817.00	\$8294.00
\$8976.00	\$8817.00	\$8294.00
\$7458.00	\$8817.00	\$8294.00
\$9513.00	\$8817.00	\$8294.00
\$7431.00	\$8817.00	\$8294.00
\$6935.00	\$8817.00	\$8294.00
\$9201.00	\$8817.00	\$8294.00
\$12032.00	\$8817.00	\$8294.00
\$7600.00	\$8817.00	\$8294.00
\$9584.00	\$8817.00	\$8294.00
\$8878.00	\$8817.00	\$8294.00
\$7344.00	\$8817.00	\$8294.00
\$7541.00	\$8817.00	\$8294.00
\$7415.00	\$8817.00	\$8294.00
\$5693.00	\$8817.00	\$8294.00
\$9580.00	\$8817.00	\$8294.00
\$7724.00	\$8817.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	56.65%		50.3%
	44.45%		50.3%
	53%		50.3%
	48.61%		50.3%
	41.41%		50.3%
	50.79%		50.3%
	47.26%		50.3%
	46.66%		50.3%
	51.94%		50.3%
	53.18%		50.3%
	43.07%		50.3%
	52.61%		50.3%
	52.53%		50.3%
	47.09%		50.3%
	51.36%		50.3%
	48.34%		50.3%
	45.32%		50.3%
	51.58%		50.3%
	49.92%		50.3%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

DEACONESS MEDICAL CENTER	500044	WA
WALLA WALLA GENERAL HOSPITAL	500049	WA
PEACEHEALTH SOUTHWEST MEDICAL CENTER	500050	WA
OVERLAKE HOSPITAL MEDICAL CENTER	500051	WA
KENNEWICK GENERAL HOSPITAL	500053	WA
PROVIDENCE SACRED HEART MEDICAL CENTER	500054	WA
KADLEC REGIONAL MEDICAL CENTER	500058	WA
CASCADE VALLEY HOSPITAL	500060	WA
HARBORVIEW MEDICAL CENTER	500064	WA
OLYMPIC MEDICAL CENTER	500072	WA
PROVIDENCE HOLY FAMILY HOSPITAL	500077	WA
MULTICARE GOOD SAMARITAN HOSPITAL	500079	WA
VALLEY GENERAL HOSPITAL	500084	WA
VALLEY MEDICAL CENTER	500088	WA
ST JOSEPH MEDICAL CENTER	500108	WA
VALLEY HOSPITAL AND MEDICAL CENTER	500119	WA
EVERGREEN HOSPITAL MEDICAL CENTER	500124	WA
TACOMA GENERAL ALLENMORE HOSPITAL	500129	WA
CAPITAL MEDICAL CENTER	500139	WA
ST FRANCIS COMMUNITY HOSPITAL	500141	WA
WENATCHEE VALLEY HOSPITAL	500148	WA

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$9723.00	\$8817.00	\$8294.00
\$7453.00	\$8817.00	\$8294.00
\$8686.00	\$8817.00	\$8294.00
\$8750.00	\$8817.00	\$8294.00
\$7096.00	\$8817.00	\$8294.00
\$11562.00	\$8817.00	\$8294.00
\$9000.00	\$8817.00	\$8294.00
\$7143.00	\$8817.00	\$8294.00
\$9839.00	\$8817.00	\$8294.00
\$7032.00	\$8817.00	\$8294.00
\$8547.00	\$8817.00	\$8294.00
\$7528.00	\$8817.00	\$8294.00
\$7132.00	\$8817.00	\$8294.00
\$8467.00	\$8817.00	\$8294.00
\$8956.00	\$8817.00	\$8294.00
\$7307.00	\$8817.00	\$8294.00
\$8216.00	\$8817.00	\$8294.00
\$9359.00	\$8817.00	\$8294.00
\$9864.00	\$8817.00	\$8294.00
\$6890.00	\$8817.00	\$8294.00
\$7015.00	\$8817.00	\$8294.00

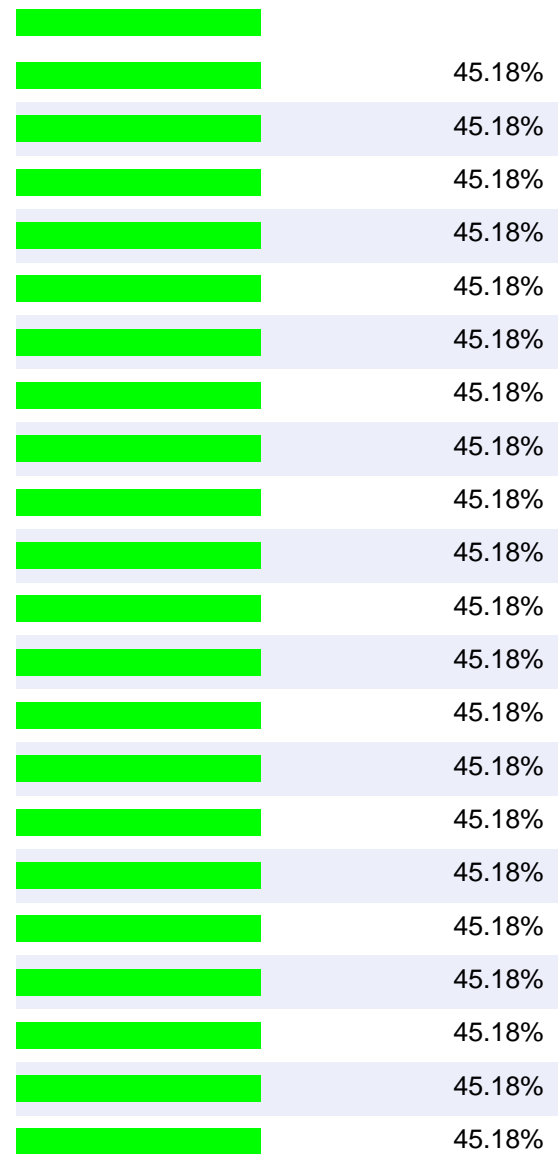
IP-Acute

Based on Spending Breakdown by Claim

	49.38%		50.3%
	46.37%		50.3%
	51.81%		50.3%
	50.04%		50.3%
	46.47%		50.3%
	54.12%		50.3%
	47.49%		50.3%
	47.88%		50.3%
	52.38%		50.3%
	45.88%		50.3%
	44.45%		50.3%
	46.64%		50.3%
	51.47%		50.3%
	48.33%		50.3%
	49.25%		50.3%
	43.36%		50.3%
	47.19%		50.3%
	51.76%		50.3%
	52.7%		50.3%
	44.2%		50.3%
	55.27%		50.3%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

LEGACY SALMON CREEK HOSPITAL	500150	WA
ST ANTHONY HOSPITAL	500151	WA
WEST VIRGINIA UNIVERSITY HOSPITALS	510001	WV
GREENBRIER VALLEY MEDICAL CENTER	510002	WV
UNITED HOSPITAL CENTER	510006	WV
ST MARY'S MEDICAL CENTER	510007	WV
CITY HOSPITAL	510008	WV
PLEASANT VALLEY HOSPITAL	510012	WV
REYNOLDS MEMORIAL HOSPITAL	510013	WV
CHARLESTON AREA MEDICAL CENTER	510022	WV
WEIRTON MEDICAL CENTER	510023	WV
MONONGALIA COUNTY GENERAL HOSPITAL	510024	WV
THOMAS MEMORIAL HOSPITAL	510029	WV
DAVIS MEMORIAL HOSPITAL	510030	WV
ST FRANCIS HOSPITAL	510031	WV
STONEWALL JACKSON MEM HOSP	510038	WV
OHIO VALLEY MEDICAL CENTER	510039	WV
PRINCETON COMMUNITY HOSPITAL	510046	WV
FAIRMONT GENERAL HOSPITAL	510047	WV
LOGAN REGIONAL MEDICAL CENTER	510048	WV
WHEELING HOSPITAL	510050	WV

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

\$8037.00	\$8817.00	\$8294.00
\$7048.00	\$8817.00	\$8294.00
\$8638.00	\$7747.00	\$8294.00
\$7069.00	\$7747.00	\$8294.00
\$7521.00	\$7747.00	\$8294.00
\$8281.00	\$7747.00	\$8294.00
\$7060.00	\$7747.00	\$8294.00
\$5434.00	\$7747.00	\$8294.00
\$6179.00	\$7747.00	\$8294.00
\$9406.00	\$7747.00	\$8294.00
\$6856.00	\$7747.00	\$8294.00
\$9028.00	\$7747.00	\$8294.00
\$7271.00	\$7747.00	\$8294.00
\$6264.00	\$7747.00	\$8294.00
\$8494.00	\$7747.00	\$8294.00
\$5417.00	\$7747.00	\$8294.00
\$7320.00	\$7747.00	\$8294.00
\$6676.00	\$7747.00	\$8294.00
\$7059.00	\$7747.00	\$8294.00
\$6125.00	\$7747.00	\$8294.00
\$8951.00	\$7747.00	\$8294.00

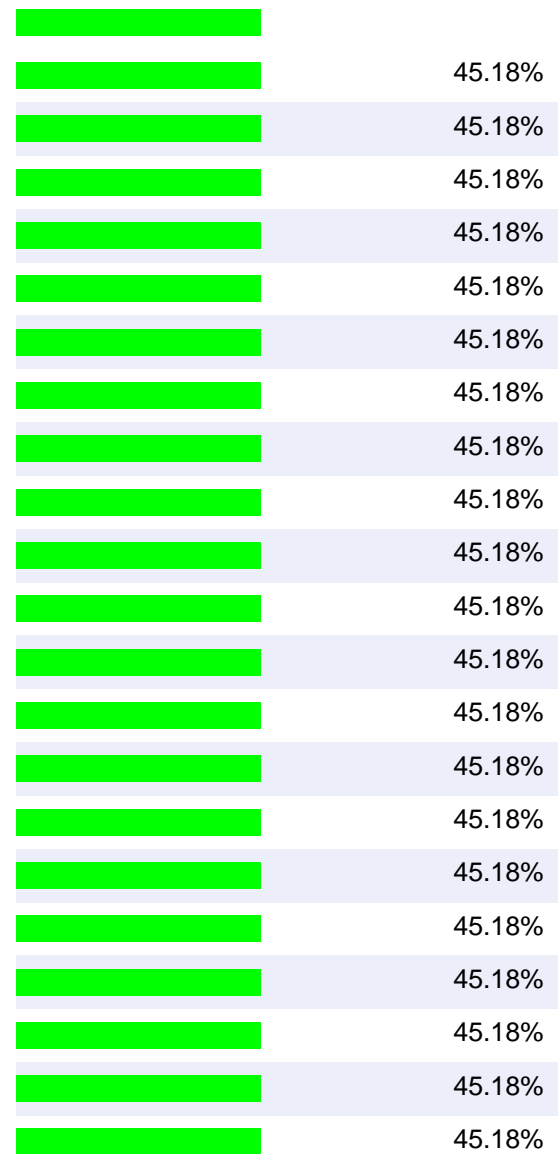
IP-Acute

Based on Spending Breakdown by Claim

	52.07%		50.3%
	46.15%		50.3%
	47.36%		47.02%
	44.06%		47.02%
	48.85%		47.02%
	48.49%		47.02%
	43.68%		47.02%
	42.73%		47.02%
	41.67%		47.02%
	51.36%		47.02%
	43.57%		47.02%
	53.56%		47.02%
	45.01%		47.02%
	50.12%		47.02%
	50.05%		47.02%
	49.02%		47.02%
	42.88%		47.02%
	44.88%		47.02%
	40.51%		47.02%
	43.94%		47.02%
	46.45%		47.02%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

ST JOSEPH HOSPITAL	510053	WV
CABELL-HUNTINGTON HOSPITAL INC	510055	WV
CAMDEN CLARK MEDICAL CENTER	510058	WV
BECKLEY ARH HOSPITAL	510062	WV
RALEIGH GENERAL HOSPITAL	510070	WV
BLUEFIELD REGIONAL MEDICAL CENTER	510071	WV
WETZEL COUNTY HOSPITAL	510072	WV
WILLIAMSON MEMORIAL HOSPITAL	510077	WV
SUMMERSVILLE REGIONAL MEDICAL CENTER	510082	WV
CAMC TEAYS VALLEY HOSPITAL	510085	WV
WELCH COMMUNITY HOSPITAL	510086	WV
ST MICHAEL'S HOSPITAL	520002	WI
MAYO CLINIC HEALTH SYSTEM-FRANCISCAN MEDICAL CENTER INC	520004	WI
WAUKESHA MEMORIAL HOSPITAL	520008	WI
ST ELIZABETH HOSPITAL	520009	WI
LAKEVIEW MEDICAL CENTER OF RICE LAKE	520011	WI
SACRED HEART HOSPITAL	520013	WI
ST JOSEPH'S HOSPITAL	520017	WI
MINISTRY ST MARYS HOSPITAL	520019	WI
UNITED HOSPITAL SYSTEM	520021	WI

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$6114.00	\$7747.00	\$8294.00
\$7347.00	\$7747.00	\$8294.00
\$8126.00	\$7747.00	\$8294.00
\$6390.00	\$7747.00	\$8294.00
\$7373.00	\$7747.00	\$8294.00
\$6827.00	\$7747.00	\$8294.00
\$5785.00	\$7747.00	\$8294.00
\$5344.00	\$7747.00	\$8294.00
\$6106.00	\$7747.00	\$8294.00
\$7415.00	\$7747.00	\$8294.00
\$6254.00	\$7747.00	\$8294.00
\$7421.00	\$8642.00	\$8294.00
\$7802.00	\$8642.00	\$8294.00
\$9171.00	\$8642.00	\$8294.00
\$8648.00	\$8642.00	\$8294.00
\$7761.00	\$8642.00	\$8294.00
\$9372.00	\$8642.00	\$8294.00
\$6668.00	\$8642.00	\$8294.00
\$8006.00	\$8642.00	\$8294.00
\$7521.00	\$8642.00	\$8294.00

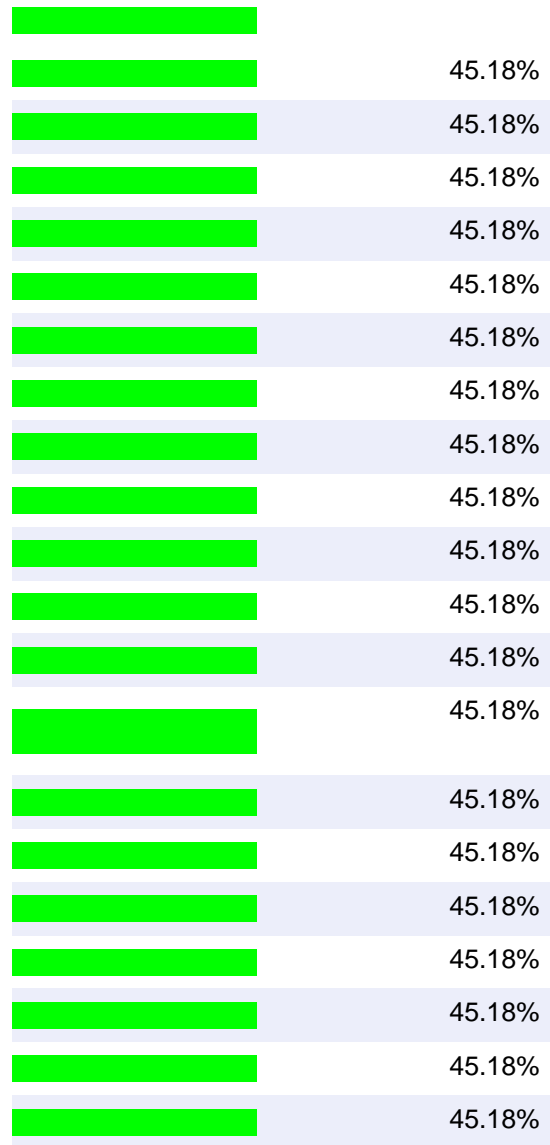
IP-Acute

Based on Spending Breakdown by Claim

	46.53%		47.02%
	48.64%		47.02%
	44.95%		47.02%
	40.61%		47.02%
	45.44%		47.02%
	44.52%		47.02%
	42.46%		47.02%
	48.31%		47.02%
	43.51%		47.02%
	42.5%		47.02%
	46.01%		47.02%
	48.34%		48.84%
	51.58%		48.84%
	49.19%		48.84%
	49.05%		48.84%
	50.13%		48.84%
	52.31%		48.84%
	47.86%		48.84%
	50.45%		48.84%
	45.64%		48.84%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

COLUMBIA ST MARY'S HOSPITAL OZAUKEE, INC	520027	WI
MONROE CLINIC	520028	WI
ASPIRUS WAUSAU HOSPITAL	520030	WI
RIVERVIEW HOSPITAL ASSOCIATION	520033	WI
AURORA MED CTR MANITOWOC CTY	520034	WI
AURORA SHEBOYGAN MEM MED CTR	520035	WI
ST JOSEPH'S HOSPITAL	520037	WI
AURORA MED CENTER-WASHINGTON COUNTY	520038	WI
DIVINE SAVIOR HLTHCARE	520041	WI
ST NICHOLAS HOSPITAL	520044	WI
THEDA CLARK MEDICAL CENTER	520045	WI
MERCY MEDICAL CENTER	520048	WI
BELLIN MEMORIAL HSPTL	520049	WI
COLUMBIA ST. MARY'S HOSPITAL MILWAUKEE	520051	WI
ST CLARE HOSPITAL HEALTH SERVICES	520057	WI
AURORA MEMORIAL HSPTL BURLINGTON	520059	WI
OCONOMOWOC MEMORIAL HOSPITAL	520062	WI
ST JOSEPHS COMMUNITY HOSPITAL WEST BEND	520063	WI
MERCY HEALTH SYSTEM CORPORATION	520066	WI
MAYO CLINIC HEALTH SYSTEM-EAU CLAIRE HOSPITAL INC	520070	WI
FORT HEALTHCARE	520071	WI

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient





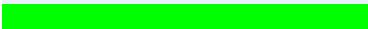
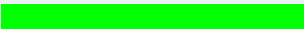
















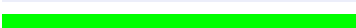
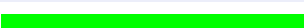
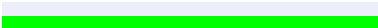
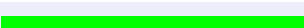
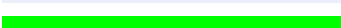
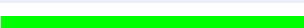
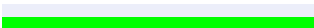
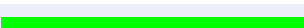
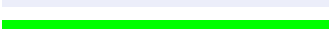
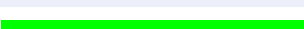
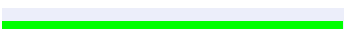
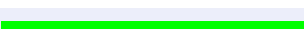
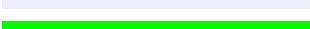
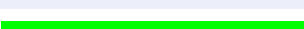
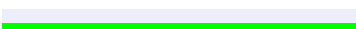
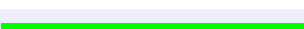




IP-Acute

Based on Spending Breakdown by Claim

\$8047.00	\$8642.00	\$8294.00
\$7493.00	\$8642.00	\$8294.00
\$9515.00	\$8642.00	\$8294.00
\$8547.00	\$8642.00	\$8294.00
\$7262.00	\$8642.00	\$8294.00
\$8493.00	\$8642.00	\$8294.00
\$8921.00	\$8642.00	\$8294.00
\$7693.00	\$8642.00	\$8294.00
\$6168.00	\$8642.00	\$8294.00
\$7650.00	\$8642.00	\$8294.00
\$9005.00	\$8642.00	\$8294.00
\$8607.00	\$8642.00	\$8294.00
\$10075.00	\$8642.00	\$8294.00
\$8206.00	\$8642.00	\$8294.00
\$6317.00	\$8642.00	\$8294.00
\$7874.00	\$8642.00	\$8294.00
\$8692.00	\$8642.00	\$8294.00
\$6985.00	\$8642.00	\$8294.00
\$7819.00	\$8642.00	\$8294.00
\$8587.00	\$8642.00	\$8294.00
\$7215.00	\$8642.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	46.22%		48.84%
	47.15%		48.84%
	51.96%		48.84%
	54.67%		48.84%
	42.99%		48.84%
	47.49%		48.84%
	51.85%		48.84%
	47.08%		48.84%
	43.26%		48.84%
	42.38%		48.84%
	49.29%		48.84%
	50.61%		48.84%
	53.29%		48.84%
	48.29%		48.84%
	44.23%		48.84%
	46.65%		48.84%
	48.41%		48.84%
	43.67%		48.84%
	50.53%		48.84%
	49.27%		48.84%
	47.43%		48.84%

IP-Acute

Based on Spending Breakdown by Claim

	45.18%
	45.18%
	45.18%
	45.18%
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	45.18%
	45.18%

IP-Acute

Based on Spending Breakdown by Claim

ST VINCENT HOSPITAL	520075	WI
BEAVER DAM COMMUNITY HOSPITAL	520076	WI
WHEATON FRANCISCAN HEALTHCARE - ST. FRANCIS HOSPITAL	520078	WI
ST MARY'S HOSPITAL	520083	WI
GUNDERSEN LUTHERAN MEDICAL CENTER	520087	WI
ST AGNES HOSPITAL	520088	WI
MERITER HOSPITAL	520089	WI
HOWARD YOUNG MEDICAL CENTER	520091	WI
SAUK PRAIRIE MEMORIAL HOSPITAL	520095	WI
WHEATON FRANCISCAN HEALTHCARE- ALL SAINTS	520096	WI
ST MARY'S HOSPITAL MEDICAL CENTER	520097	WI
UNIVERSITY OF WI HOSPITALS & CLINICS AUTHORITY	520098	WI
BELOIT HEALTH SYSTEM	520100	WI
AURORA LAKELAND MEDICAL CENTER	520102	WI
COMMUNITY MEMORIAL HSPTL	520103	WI
HOLY FAMILY MEMORIAL	520107	WI
MILE BLUFF MEDICAL CENTER, INC	520109	WI
BAY AREA MEDICAL CENTER	520113	WI
WATERTOWN MEMORIAL HOSPITAL	520116	WI
WHEATON FRANCISCAN, INC- ST JOSEPH	520136	WI

IP-Acute

Based on Spending Breakdown by Claim

[illegible]





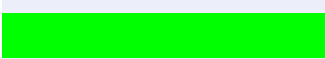
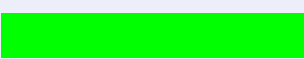








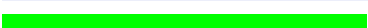
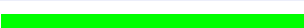
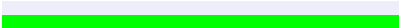
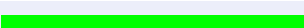
















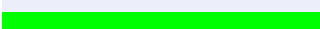
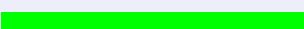


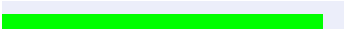
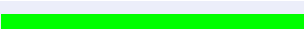
IP-Acute

Based on Spending Breakdown by Claim

\$9745.00	\$8642.00	\$8294.00
\$7208.00	\$8642.00	\$8294.00
\$8594.00	\$8642.00	\$8294.00
\$8690.00	\$8642.00	\$8294.00
\$9247.00	\$8642.00	\$8294.00
\$7857.00	\$8642.00	\$8294.00
\$8273.00	\$8642.00	\$8294.00
\$7936.00	\$8642.00	\$8294.00
\$8466.00	\$8642.00	\$8294.00
\$7933.00	\$8642.00	\$8294.00
\$8305.00	\$8642.00	\$8294.00
\$10788.00	\$8642.00	\$8294.00
\$7597.00	\$8642.00	\$8294.00
\$7337.00	\$8642.00	\$8294.00
\$8585.00	\$8642.00	\$8294.00
\$7816.00	\$8642.00	\$8294.00
\$5666.00	\$8642.00	\$8294.00
\$6820.00	\$8642.00	\$8294.00
\$8006.00	\$8642.00	\$8294.00
\$9011.00	\$8642.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	50.21%		48.84%
	44.18%		48.84%
	45.88%		48.84%
	50.87%		48.84%
	52.63%		48.84%
	47.17%		48.84%
	51.08%		48.84%
	51.73%		48.84%
	56.67%		48.84%
	47.41%		48.84%
	51.25%		48.84%
	54.38%		48.84%
	46.63%		48.84%
	43.06%		48.84%
	45.85%		48.84%
	42.49%		48.84%
	48.63%		48.84%
	45.18%		48.84%
	45.58%		48.84%
	48.62%		48.84%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

AURORA HEALTH CARE METRO, INC	520138	WI
WEST ALLIS MEMORIAL HOSPITAL	520139	WI
APPLETON MEDICAL CENTER	520160	WI
FROEDTERT MEMORIAL LUTHERAN HOSPITAL	520177	WI
AURORA MEDICAL CENTER KENOSHA	520189	WI
AURORA BAYCARE MEDICAL CENTER	520193	WI
ORTHOPAEDIC HOSPITAL OF WI	520194	WI
OAK LEAF SURGICAL HOSPITAL	520196	WI
AURORA MEDICAL CENTER OSHKOSH	520198	WI
ST CLARE'S HOSPITAL OF WESTON INC	520202	WI
WHEATON FRANCISCAN HEALTHCARE- FRANKLIN, INC	520204	WI
MIDWEST ORTHOPEDIC SPECIALTY HOSPITAL	520205	WI
AURORA MEDICAL CENTER - SUMMIT	520206	WI
AURORA MEDICAL CENTER	520207	WI
CAMPBELL COUNTY MEMORIAL HOSPITAL	530002	WY
SHERIDAN MEMORIAL HOSPITAL	530006	WY
RIVERTON MEMORIAL HOSPITAL	530008	WY
LANDER REGIONAL HOSPITAL	530010	WY
MEMORIAL HOSPITAL OF SWEETWATER COUNTY	530011	WY
WYOMING MEDICAL CENTER	530012	WY

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$9730.00	\$8642.00	\$8294.00
\$7278.00	\$8642.00	\$8294.00
\$9935.00	\$8642.00	\$8294.00
\$8963.00	\$8642.00	\$8294.00
\$7724.00	\$8642.00	\$8294.00
\$9939.00	\$8642.00	\$8294.00
\$12424.00	\$8642.00	\$8294.00
\$11418.00	\$8642.00	\$8294.00
\$8859.00	\$8642.00	\$8294.00
\$9399.00	\$8642.00	\$8294.00
\$6436.00	\$8642.00	\$8294.00
\$11948.00	\$8642.00	\$8294.00
\$8662.00	\$8642.00	\$8294.00
\$8896.00	\$8642.00	\$8294.00
\$6061.00	\$8579.00	\$8294.00
\$7537.00	\$8579.00	\$8294.00
\$5345.00	\$8579.00	\$8294.00
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\$6418.00	\$8579.00	\$8294.00
\$10249.00	\$8579.00	\$8294.00

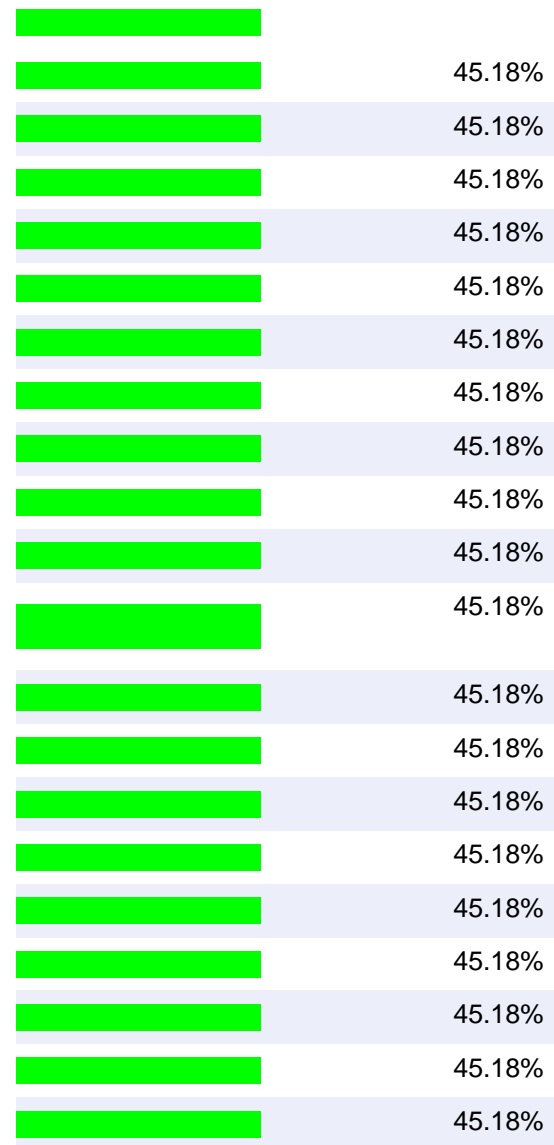
IP-Acute

Based on Spending Breakdown by Claim

	48.1%		48.84%
	40.24%		48.84%
	51.32%		48.84%
	48.27%		48.84%
	42.7%		48.84%
	53.19%		48.84%
	60.74%		48.84%
	60.88%		48.84%
	47.81%		48.84%
	52.96%		48.84%
	40.26%		48.84%
	56.51%		48.84%
	46.47%		48.84%
	48.39%		48.84%
	48.69%		49.39%
	48.38%		49.39%
	43.39%		49.39%
	44.29%		49.39%
	42.21%		49.39%
	51.31%		49.39%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

CHEYENNE REGIONAL MEDICAL CENTER	530014	WY
ST JOHNS MEDICAL CENTER	530015	WY
IVINSON MEMORIAL HOSPITAL	530025	WY
EVANSTON REGIONAL HOSPITAL	530032	WY
MOUNTAIN VIEW REGIONAL HOSPITAL	530033	WY
SOUTH HAMPTON COMMUNITY HOSPITAL	670002	TX
ST MARKS MEDICAL CENTER	670004	TX
MEMORIAL HERMANN SURGICAL HOSPITAL KINGWOOD	670005	TX
THE HOSPITAL AT WESTLAKE MEDICAL CENTER	670006	TX
HOUSTON PHYSICIANS' HOSPITAL	670008	TX
HOUSTON ORTHOPEDIC AND SPINE HOSPITAL	670012	TX
DOCTORS DIAGNOSTIC HOSPITAL	670018	TX
UNIVERSITY GENERAL HOSPITAL	670019	TX
METHODIST MANSFIELD MEDICAL CENTER	670023	TX
NORTH CYPRESS MEDICAL CENTER	670024	TX
THE HEART HOSPITAL BAYLOR PLANO	670025	TX
FIRST STREET HOSPITAL LP	670029	TX
ST LUKE'S PATIENTS MEDICAL CENTER	670031	TX
SCOTT & WHITE HOSPITAL-ROUND ROCK	670034	TX
SETON MEDICAL CENTER WILLIAMSON	670041	TX
CEDAR PARK REGIONAL MEDICAL CENTER	670043	TX

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

\$9132.00	\$8579.00	\$8294.00
\$8991.00	\$8579.00	\$8294.00
\$7060.00	\$8579.00	\$8294.00
\$5875.00	\$8579.00	\$8294.00
\$12266.00	\$8579.00	\$8294.00
\$6077.00	\$8491.00	\$8294.00
\$6924.00	\$8491.00	\$8294.00
\$11096.00	\$8491.00	\$8294.00
\$11219.00	\$8491.00	\$8294.00
\$12062.00	\$8491.00	\$8294.00
\$14826.00	\$8491.00	\$8294.00
\$5489.00	\$8491.00	\$8294.00
\$9861.00	\$8491.00	\$8294.00
\$8191.00	\$8491.00	\$8294.00
\$8809.00	\$8491.00	\$8294.00
\$19124.00	\$8491.00	\$8294.00
\$8957.00	\$8491.00	\$8294.00
\$7404.00	\$8491.00	\$8294.00
\$8388.00	\$8491.00	\$8294.00
\$8346.00	\$8491.00	\$8294.00
\$7383.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

<div></div>	48.81%	<div></div>	49.39%
<div></div>	54.96%	<div></div>	49.39%
<div></div>	45.69%	<div></div>	49.39%
<div></div>	50.04%	<div></div>	49.39%
<div></div>	56.84%	<div></div>	49.39%
<div></div>	30.88%	<div></div>	42.95%
<div></div>	39.84%	<div></div>	42.95%
<div></div>	55.66%	<div></div>	42.95%
<div></div>	52.4%	<div></div>	42.95%
<div></div>	63.6%	<div></div>	42.95%
<div></div>	58.85%	<div></div>	42.95%
<div></div>	44.79%	<div></div>	42.95%
<div></div>	37.11%	<div></div>	42.95%
<div></div>	41.39%	<div></div>	42.95%
<div></div>	41.51%	<div></div>	42.95%
<div></div>	65.82%	<div></div>	42.95%
<div></div>	59.32%	<div></div>	42.95%
<div></div>	34.75%	<div></div>	42.95%
<div></div>	45.58%	<div></div>	42.95%
<div></div>	43.28%	<div></div>	42.95%
<div></div>	43.13%	<div></div>	42.95%

IP-Acute

Based on Spending Breakdown by Claim

[illegible]

IP-Acute

Based on Spending Breakdown by Claim

TEXAS HEALTH PRESBYTERIAN HOSPITAL ROCKWALL	670044	TX
USMD HOSPITAL AT FORT WORTH LP	670046	TX
SIERRA PROVIDENCE EAST MEDICAL CENTER	670047	TX
NORTH CENTRAL SURGICAL CENTER LLP	670049	TX
TRUSTPOINT HOSPITAL	670050	TX
NORTH TEXAS COMMUNITY HOSPITAL	670052	TX
ST LUKE'S SUGAR LAND HOSPITAL	670053	TX
FOUNDATION SURGICAL HOSPITAL OF SAN ANTONIO	670054	TX
METHODIST STONE OAK HOSPITAL	670055	TX
SETON MEDICAL CENTER HAYS	670056	TX
ST LUKES LAKESIDE HOSPITAL	670059	TX
TEXAS REGIONAL MEDICAL CENTER AT SUNNYVALE	670060	TX
SOUTH TEXAS SURGICAL HOSPITAL	670061	TX
BASIN HEALTHCARE CENTER, LLC	670066	TX
BAYLOR ORTHOPEDIC AND SPINE HOSPITAL AT ARLINGTON	670067	TX
TEXAS HEALTH PRESBYTERIAN HOSPITAL FLOWER MOUND	670068	TX
METHODIST MCKINNEY HOSPITAL	670069	TX
TEXAS HEALTH HEART & VASCULAR HOSPITAL ARLINGTON	670071	TX

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
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During Index Hospital Admission	Inpatient














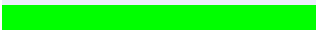
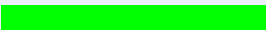

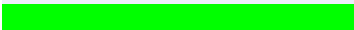
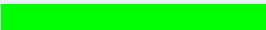






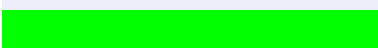
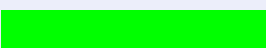

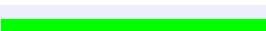
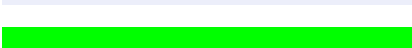
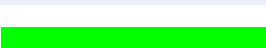
IP-Acute

Based on Spending Breakdown by Claim

\$7232.00	\$8491.00	\$8294.00
\$10703.00	\$8491.00	\$8294.00
\$7996.00	\$8491.00	\$8294.00
\$12119.00	\$8491.00	\$8294.00
\$5848.00	\$8491.00	\$8294.00
\$4856.00	\$8491.00	\$8294.00
\$8161.00	\$8491.00	\$8294.00
\$13498.00	\$8491.00	\$8294.00
\$8872.00	\$8491.00	\$8294.00
\$8357.00	\$8491.00	\$8294.00
\$12266.00	\$8491.00	\$8294.00
\$7809.00	\$8491.00	\$8294.00
\$10725.00	\$8491.00	\$8294.00
\$5963.00	\$8491.00	\$8294.00
\$13250.00	\$8491.00	\$8294.00
\$7411.00	\$8491.00	\$8294.00
\$10703.00	\$8491.00	\$8294.00
\$11385.00	\$8491.00	\$8294.00

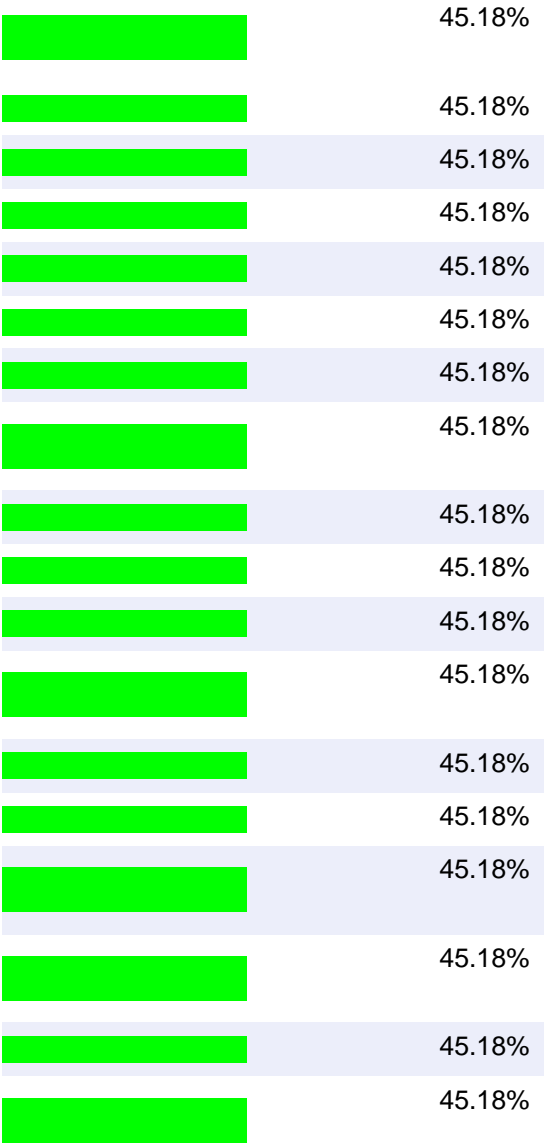
IP-Acute

Based on Spending Breakdown by Claim

	42.52%		42.95%
	61.37%		42.95%
	42.54%		42.95%
	55.32%		42.95%
	24.9%		42.95%
	36.82%		42.95%
	35%		42.95%
	60.35%		42.95%
	44.6%		42.95%
	47.04%		42.95%
	50.12%		42.95%
	37.91%		42.95%
	59.01%		42.95%
	51.78%		42.95%
	53.63%		42.95%
	39.49%		42.95%
	48.23%		42.95%
	58.36%		42.95%

IP-Acute

Based on Spending Breakdown by Claim



IP-Acute

Based on Spending Breakdown by Claim

ARLINGTON

WESTBURY COMMUNITY HOSPITAL, LLC	670072	TX
METHODIST HOSPITAL FOR SURGERY	670073	TX
ST LUKE'S HOSPITAL AT THE VINTAGE, LLC	670075	TX
HERITAGE PARK SURGICAL HOSPITAL	670076	TX
METHODIST WEST HOUSTON HOSPITAL	670077	TX

IP-Acute

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Inpatient

IP-Acute

Based on Spending Breakdown by Claim

	\$5041.00	\$8491.00	\$8294.00
	\$14422.00	\$8491.00	\$8294.00
	\$7289.00	\$8491.00	\$8294.00
	\$10833.00	\$8491.00	\$8294.00
	\$8138.00	\$8491.00	\$8294.00

IP-Acute

Based on Spending Breakdown by Claim

	35.18%		42.95%
	55.45%		42.95%
	36.5%		42.95%
	47.61%		42.95%
	40.55%		42.95%

IP-Acute

Based on Spending Breakdown by Claim

